## P24000032152

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
<del></del>
Special Instructions to Filing Officer:





500426177255

03/26/24--01003--002 \*\*113.75

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Signed this 13 day of March	. 2024	
Required Signature for Florida Profit Corporation	<u>:</u>	
Signature of Director, Officer, or, if Directors or Officer		
Printed Name: Mr. S Comas Title: Mc		
companies: [See below for required signature(s).]	rida partnerships, limited partnerships, and limited liabi	<u>lity</u>
Signature:		
Signature: Thr. S (ran. as	Title: Manager	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.		
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	2024 Ná., 26	
All others: Signature of an authorized person.	?: ?: ?:	
Fees:	·	
Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

## ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

he principal place of business/mailing address is:		
Principal street address	Mailing	address, if different is:
101 S SCOTT AVE		
SANFORD, FL 32771		
RTICLE III PURPOSE the purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSIN	IESS	
	· · · · · · · · · · · · · · · · · · ·	
ARTICLE IV SHARES he number of shares of stock is:		
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V OFFICERS AND/OR DIRECTORS		
he number of shares of stock is:	Name and Title:	
RTICLE V OFFICERS AND/OR DIRECTORS  ame and Title: Chris James Cranias - Manager	Name and Title:	2024
RTICLE V OFFICERS AND/OR DIRECTORS ame and Title:  Chris James Cranias - Manager	Address:	PA-
ATICLE V OFFICERS AND/OR DIRECTORS  Same and Title:  Chris James Cranias - Manager  401 S Scott Ave  Sanford, FL 32771	Address:	A. 26
me number of shares of stock is:	Address:  Name and Title:	Ar 2b A
RTICLE V OFFICERS AND/OR DIRECTORS ame and Title:  Chris James Cranias - Manager  401 S Scott Ave  Sanford, FL 32771  ame and Title:  ddress:	Address:  Name and Title:  Address:	MAN 26 ATT 2: 11
tame and Title:    Chris James Cranias - Manager	Address:  Name and Title:  Address:	Ar 2b A

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:

Chris James Cranias

Address:

401 S SCOTT AVE

SANFORD, FL 32771

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Required Signature/Registered Agent

3-13-2024