

Florida Department of State  
Division of Corporations  
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P24 000042810

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.  
Account Number : I20030000043  
Phone : (800)342-9856  
Fax Number : (800)354-3381

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
UPSLY INTERNATIONAL INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

2024 JUN 24 PM 1:19

RECEIVED

2126

Jun. 24. 2024 12:41PM

ARTICLES OF INCORPORATION

FLA. STAT. § 607.01(2)(b) 213

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: UPSLY INTERNATIONAL INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
4785 4TH AVENUE NE  
NAPLES, FL 34120

Mailing address, if different is:  
4785 4TH AVENUE NE  
NAPLES, FL 34120

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS PURPOSE

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CHRISTINE DURNALL/PRESIDENT Name and Title: \_\_\_\_\_

Address 4785 4TH AVENUE NE Address: \_\_\_\_\_  
NAPLES, FLORIDA 34120 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Jun. 24. 2024 12:41PM -

H044 No. 154411 P. 345

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: CHRISTINE DURNALL  
Address: 4785 4<sup>TH</sup> AVENUE NE  
NAPLES, FLORIDA 34120

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LAWRENCE KIRSCH  
Address: 41 STATE STREET SUITE 700  
ALBANY, NY 12207

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

/S/ CHRISTINE DURNALL

Required Signature/Registered Agent

6/24/24

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Lawrence A. Kirsch

Required Signature/Incorporator

6/24/24

Date