

P2400043342

Florida Department of State
Division of Corporations
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Division of Corporations
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CORPORATIONS
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FLORIDA PROFIT/NON PROFIT CORPORATION
Bunniner Consulting, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

2024

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Bunniner Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

14003 Old Dade City Rd

Kathleen, FL 33849

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Consulting

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Victor Zamudio, President

Name and Title: _____

Address 14003 Old Dade City Rd

Address: _____

Kathleen, FL 33849

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Victor ZamudioAddress: 14003 Old Dade City RdKathleen, FL 33849**ARTICLE VII INCORPORATOR**The name and address of the incorporator is:Name: Victor ZamudioAddress: 14003 Old Dade City RdKathleen, FL 33849**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*Victor Zamudio

Required Signature/Registered Agent

06/18/2024

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.*Victor Zamudio

Required Signature/Incorporator

06/18/2024

Date