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From:
Account Name : MARK M. HASNER P.A.
Account Number : I20150000083
Phone : (305)371-5758
Fax Number : (305)371-3178

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Email Address: AHasner@Therrelbaisden.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
ALEXANDRA M. HASNER, P.A.**

Certificate of Status	0
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ARTICLES OF INCORPORATION
OF
ALEXANDRA M. HASNER, P.A.

ARTICLE I
Name

The name of the corporation is ALEXANDRA M. HASNER, P.A.

ARTICLE II
Duration

This corporation shall have a perpetual existence, unless dissolved according to law, commencing on the 8th day of July, 2024.

ARTICLE III
Purpose

This corporation is organized for the purpose of engaging in the practice of law in the State of Florida.

ARTICLE IV
Capital Stock

This corporation is authorized to issue ONE HUNDRED (100) shares of ONE AND NO/100 DOLLARS (\$1.00) par value common stock, which shall be designated "Common Shares."

ARTICLE V
Principal Office; Initial Registered Office and Agent

The street address of the initial principal office and registered office of this corporation is: One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131 and the name of the initial registered agent of this corporation at that address is: ALEXANDRA M. HASNER, Esq.

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ARTICLE VI
Initial Board of Directors

This corporation shall initially have one (1) director. The number of directors may be increased or decreased from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director of this corporation is: ALEXANDRA M. HASNER, Esq.

ARTICLE VII
Incorporator

The name and address of the person signing these Articles is: ALEXANDRA M. HASNER, Esq., One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131 .

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation on this 8th day of July, 2024.



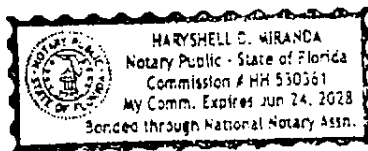
ALEXANDRA M. HASNER, Incorporator

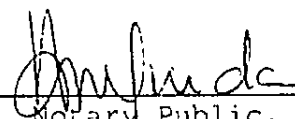
STATE OF FLORIDA:

SS:

COUNTY OF MIAMI-DADE:

The foregoing instrument was acknowledged before me this 8th day of July, 2024, by ALEXANDRA M. HASNER, Esq., who is personally known to me or who has produced _____ as identification.





Notary Public, State of Florida
at Large

Type/Print/or Stamp Name of Notary

My Commission Expires:

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED**

ALEXANDRA M. HASNER, P.A.

In pursuance of the Florida Statutes, the following is submitted, in compliance with said Act:

First--that **ALEXANDRA M. HASNER, P.A.**, desiring to organize under the laws of the State of Florida with its principal office at: One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131, has named ALEXANDRA M. HASNER, Esq., located at One Downtown, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131, as its agent to accept service of process within this state.

Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.


ALEXANDRA M. HASNER