

P24000055620

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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

## 1. GILZS TECHNOLOGIES CORP

(CORPORATE NAME)

(DOCUMENT #)

2.

(CORPORATE NAME)

(DOCUMENT #)

3.

(CORPORATE NAME)

(DOCUMENT #)

☐ Walk-In



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Certificate of Status

New Filings	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input checked="" type="checkbox"/>	Other: Domestication

Amendments	
<input type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials	
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TALLAHASSEE, FL

Articles of Domestication  
Foreign Corporation Domesticating to Florida

The undersigned, DAVID SOLIMAN, PRESIDENT  
(Name) (Title)  
of GILZ TECHNOLOGIES INC, a foreign  
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of  
Domestication.

1. Then name of the domesticating corporation is GILZS TECHNOLOGIES CORP  
(Foreign Corporation)
2. The jurisdiction and date of its formation is CALIFORNIA 01/20/2015
3. The name of the domesticated corporation is GILZ TECHNOLOGIES INC
4. The jurisdiction of formation of the domesticated corporation is Florida
5. The domestication corporation is a foreign corporation and the domestication was  
approved in accordance with its organic law.
6. Attached are Florida Articles of Incorporation to complete the domestication  
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

  
David Soliman (Aug 28, 2024 15:45 EDT)  
(Authorized Signature)

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STATE  
TAMPA, FL

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**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

GILZS TECHNOLOGIES CORP

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address  
950 5 STREET STE 404

MIAMI, FL 33139

Mailing Address  
950 5 STREET STE 404

MIAMI, FL 33139

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:  
ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: SHARES: 100

**ARTICLE VI    REGISTERED AGENT AND STREET ADDRESS**

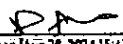
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

DAVID SOLIMAN

950 5 STREET STE 404

MIAMI, FL 33139

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

  
David Soliman (Aug 28, 2024 15:45 EDT)

Signature/Registered Agent

Date

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**ARTICLE V DIRECTORS AND/ OR OFFICERS**

*THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:*

Name & Title: DAVID SOLIMAN (P)

Address: 950 5 STREET STE 404

MIAMI, FL 33139

Name & Title: \_\_\_\_\_

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

Name & Title: \_\_\_\_\_

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

Name & Title: \_\_\_\_\_

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

Name & Title: \_\_\_\_\_

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

Name & Title: \_\_\_\_\_

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

Name & Title: \_\_\_\_\_

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

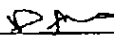
Name & Title: \_\_\_\_\_

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

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**I submit this document and affirm that the facts stated herein are true. I am aware that 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.**

  
David Soliman (Aug 28, 2024 13:45 EDT)

Signature/Authorized Person

Date