

P240000 65771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

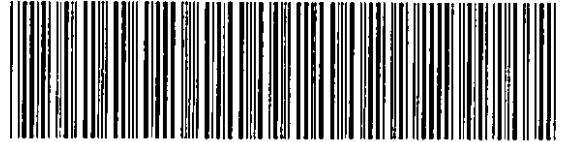
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100434690621

2024 OCT 24 PM 3:47

RECEIVED

2024 OCT 24 AM 11:21
SECTION 156.01, F.S.
TALLAHASSEE, FLORIDA

RECEIVED



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext: x61563
Date: 10/23/24
Order #: 1658610-1
Re: Verde Investments Florida Corp.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$70.00 - FL State Account Number:
120000000195

A handwritten signature in black ink, appearing to read "Shauna Godbolt", is written over the text of the enclosed items.

2024 OCT 23 PM 3:47

Please take the following action:
File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

ARTICLE I NAME

VERDE INVESTMENTS FLORIDA CORP.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

40 S.W. 13TH STREET SUITE 802

40 S.W. 13TH STREET SUITE 802

MIAMI, FLORIDA 33130

MIAMI, FLORIDA 33130

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares of \$1.00 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ivan Anuar Farha Filho,
Director/President/Secretary

Name and Title: _____

Address: 40 S.W. 13TH STREET SUITE 802

Address: _____

MIAMI, FLORIDA 33130

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 AGENT

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

Name: Dymax International Services Inc.
Address: 40 S.W. 13TH STREET SUITE 802
MIAMI, FLORIDA 33130

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

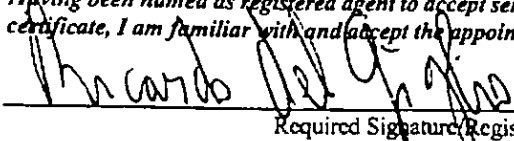
Name: Ivan Anuar Farha Filho
Address: 40 S.W. 13TH STREET SUITE 802
MIAMI, FLORIDA 33130

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.

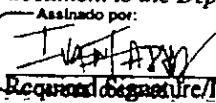
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature Registered Agent

10/18/2024

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.S.

Assinado por:

Required Signature Incorporator

10/18/2024

Date