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Fax Number : (850)617-6381

From:

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albert@afzservices.com Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION TALENTHUB FL INC

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ARTICLES OF INCORPORATION

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

	Principal street address	Mailing a	iddress, if different is:
30 NE 5TH AVE			
AKLAND PARK, FL			
TICLE III PURPO e purpose for which the	OSE ne corporation is organized is:	MENT	
	stock is: L OFFICERS AND/OR DIRECTORS		
number of shares of s TICLE V INITIA Name and Title	L OFFICERS AND/OR DIRECTORS ZUHRA USMONOVA , PRESIDENT	Name and Title:	
number of shares of s	stock is: L OFFICERS AND/OR DIRECTORS	Name and Title:	
number of shares of s TICLE V INITIA Name and Title	L OFFICERS AND/OR DIRECTORS ZUHRA USMONOVA , PRESIDENT 3930 NE 5TH AVE	Name and Title:	
number of shares of s TICLE V INITIA Name and Title Address	LOFFICERS AND/OR DIRECTORS ZUHRA USMONOVA, PRESIDENT 3930 NE 5TH AVE OAKLAND PARK, FL 33334	Name and Title:Address:	2024 DEC
number of shares of states of states of states and Title Address Name and Title:	LOFFICERS AND/OR DIRECTORS ZUHRA USMONOVA, PRESIDENT 3930 NE 5TH AVE OAKLAND PARK, FL 33334	Name and Title: Address: Name and Title:	2024 DEC -1
number of shares of s TICLE V INITIA Name and Title Address	LOFFICERS AND/OR DIRECTORS ZUHRA USMONOVA, PRESIDENT 3930 NE 5TH AVE OAKLAND PARK, FL 33334	Name and Title: Address: Name and Title:	2024 DEC -4 1
number of shares of states of states of states and Title Address Name and Title:	LOFFICERS AND/OR DIRECTORS ZUHRA USMONOVA, PRESIDENT 3930 NE 5TH AVE OAKLAND PARK, FL 33334	Name and Title: Address: Name and Title:	2024 DEC -4 AM 8
number of shares of states	LOFFICERS AND/OR DIRECTORS ZUHRA USMONOVA, PRESIDENT 3930 NE 5TH AVE OAKLAND PARK, FL 33334	Name and Title: Address: Name and Title:	2024 DEC -4 MM
Name and Title: Address	LOFFICERS AND/OR DIRECTORS ZUHRA USMONOVA, PRESIDENT 3930 NE 5TH AVE OAKLAND PARK, FL 33334	Name and Title: Address: Name and Title: Address:	2024 DEC -4 IM 8: 14 PIT SESSE FLORID

(((H24000399246 3))) 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: ZUHRA USMONOVA Name: 3930 NE 5TH AVE Address: OAKLAND PARK, FL 33334 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: ZUHRA USMONOVA Name: 3930 NE 5TH AVE Address: OAKLAND PARK, FL 33334 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 business days prior or 90 business. 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/ ZUHRA USMONOVA 12/04/2024 Date Required Signature/Registered Agent 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. /s/ ZUHRA USMONOVA 12/04/2024 Required Signature/Incorporator Date

From: 17184082550 To: 18506176381 Date Time 12/04/24 11: 44AM Pages: 3 P: 3/3

12/04/2024 11:44