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| SUBJECT: | (PDOPOSED CODDOD | ATE NAME - MUST INCL | HDE CHEELV |
|-------------------------|--|---------------------------------------|--|
| | (I KOI OSLD COKI OK | ATE NAME = MOST INCL | ODE SOFFIX) |
| Enclosed are an orig | ginal and one (1) copy of the ar | ticles of incorporation and | d a check for: |
| □ \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy | ☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| | | ADDITIONAL COPY REQUIRED | |
| FROM: | Nam | e (Printed or typed) | |
| | | Address | |
| _ | City | . State & Zip | |
| | Daytime [*] | Felephone number | |
| <u></u> | E-mail address: (to be use | d for future annual report r | notification) |

NOTE: Please provide the original and one copy of the articles.

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

| Purpose for which the corporation is organized is: any lawful purpose. SICLE IV SHARES number of shares of stock is: 1,000 shares of common stock, par value \$0.01 per share | |
|---|------------------|
| PICLE IV SHARES number of shares of stock is: 1,000 shares of common stock, par value \$0.01 per share PICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Cem Kus, CEO and Director Name and Title: Janet Kus, Presid Address 1350 S Powerline Road Ste 200 Address: 1350 S Powerline Road Ste 200 Pompano Beach, PL 33069 Pompano Beach Name and Title: Name and Title: Address Address: Name and Title: Name and T | different is: |
| Name and Title: Cem Kus, CEO and Director Name and Title: Janet Kus, Presid Address 1350 S Powerline Road Ste 200 Address: 1350 S Powerline Pompano Beach, FL 33069 Pompano Beach Name and Title: Name and Title: Address Address: Name and Title: Name and Ti | |
| Name and Title: Cem Kus, CEO and Director Name and Title: Janet Kus, Presid Address 1350 S Powerline Road Ste 200 Address: 1350 S Powerline Pompano Beach, FL 33069 Pompano Beach Name and Title: Name and Title: Address Address: Name and Title: Name and Ti | |
| Name and Title: Cem Kus, CEO and Director Name and Title: Janet Kus, Presid Address 1350 S Powerline Road Ste 200 Address: 1350 S Powerline Pompano Beach, FL 33069 Pompano Beach Name and Title: Name and Title: Address Address: Name and Title: Name and Ti | |
| Address 1350 S Powerline Road Ste 200 Address: 1350 S Powerline Pompano Beach, FL 33069 Pompano Beach Name and Title: Address Address: Name and Title: Name and Title: Name and Title: Name and Title: | |
| Pompano Beach, FL 33069 Name and Title: Address Name and Title: Name and Title: Name and Title: Name and Title: | lent and Directo |
| Name and Title: Address Address: Name and Title: Name and Title: Name and Title: | e Road Ste 200 |
| Address: Name and Title: Name and Title: | ı, FL 33069 |
| Name and Title: Name and Title: | |
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| Name an | d Title: | Name and Title: |
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| Address | | Address: |
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| | | |
| | <u>REGISTERED, AGENT</u> orida street address (P.O. Box NOT acceptable) c | of the registered agent is: |
| Name: | Cogency Global, Inc. | _ |
| Address: | 115 North Calhoun Street Ste 4 | _ _ |
| | Tallahassee, FL 32301 | - |
| ADTICLE VII | <u>INCORPORATOR</u> | |
| | dress of the Incorporator is: | |
| Name: | Cem Kus | |
| Address: | 1350 S Powerline Road Ste 200 | <u></u> |
| | Pompano Beach, FL 33069 | - - |
| | | |
| Effective date, if | EFFECTIVE DATE: other than the date of filing: | (OPTIONAL) |
| (If an effective d filing.) | ate is listed, the date must be specific and cann | ot be more than five days prior or 90 days after the |
| Note: If the date the document's el | inserted in this block does not meet the applicable fective date on the Department of State's records | e statutory filing requirements, this date will not be listed a |
| | ed as registered agent to accept service of process j miliar with and accept the appointment as registe | for the above stated corporation at the place designated in t red agent and agree to act in this capacity |
| Tajanas' | Willer , Assistant Secretary Required Signature/Registered Agent | 12/19/2024 |
| | | Date |
| l submit this doc document to the I | ument and affirm that the facts stated herein are Department of State constitutes a third degree felor | true. I am aware that the false information submitted in ny as provided for in s.817.155, F.S. |
| | Jan 1 | 12/19/2024 |
| Required Signatu | e/Incorporator | Date |

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