Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000104823 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 : (845)818-3588 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

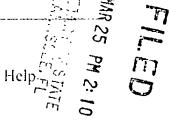
			-
Fmail	Address:		
		· · · · · · · · · · · · · · · · · · ·	٠,

FLORIDA PROFIT/NON PROFIT CORPORATION

Cypress Dynamics, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu



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

Name and Title: Name and Title: Address Name and Title: Nicholas Osher, Secretary Name and Title: Address Name and Title: Address Name and Title: Address: Address: Name and Title: Address: Address: Name and Title: Address: Address				· · -
Address Name and Title: Name and Title: Address Address Address Address:		Principal street address	Mailing a	iddress, if different is:
RTICLE IV SHARES the purpose for which the corporation is organized is: CONSULTING RTICLE IV SHARES the number of shares of stock is: RTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Name and Title: Address Name and Title: Name and Title: Address Address: Address: Name and Title: Address Address: Ad	9723 Brickel Point	10		
Address Name and Title: Address Address Address Name and Title: Address Address Address Address Address Address Address Address: Address Address:	768 (Valon, 71. 354)	70		<u>, , , , , , , , , , , , , , , , , , , </u>
CITICLE IV SHARES e number of shares of stock is: ETICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address Boca Raton, Fl. 33498 Name and Title: Address Name and Title: Name and Title: Address Address: Add				
CTICLE IV SHARES e number of shares of stock is: Name and Title: Address Name and Title: Address Name and Title: Address Name and Title: Address Address: Address: Name and Title: Address: Addre	RTICLE III PUR	POSE Consu	lting	
Name and Title: Name and Title: Normal Title: Address Name and Title: Normal	e purpose for whic	h the corporation is organized is:		
Name and Title: Address Name and Title: Name and Title: Address Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title:				
Name and Title: Address Name and Title: Name and Title: Address Name and Title: Address: Address: Name and Title: Address: Name and Title: Address: Name and Title:				174
Name and Title: Address Address: Addr				7
Name and Title: Address Address: Addres				
Name and Title: Address Name and Title: Address Name and Title: Address: Address: Address: Name and Title: Address: Address: Name and Title: Name and Title: Address: Name and Title: Address: Address: Name and Title: Name and Title: Name and Title: Address: Name and Title:				
Name and Title: Address Name and Title: Address Name and Title: Address: Address: Address: Name and Title: Address: Address: Name and Title: Name and Title: Address: Name and Title: Address: Address: Name and Title: Name and Title: Name and Title: Address: Name and Title:				
Name and Title: Address Name and Title: Address Name and Title: Address: Address: Address: Name and Title: Address: Address: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: Name and Title: Address: Address				
Address Port Point Dr. Address:				
Name and Title: Address Name and Title: Address Name and Title: Address Name and Title: Name and Title: Address Name and Title: Address Name and Title: Address: Address: Name and Title: Address: Address: Name and Title: Address: Address: Name and Title: Address: Name and Title: Address: Address: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title: Address:				
Name and Title: Address Name and Title: Address Name and Title: Boca Raton, FL 33498 Name and Title: Address Name and Title: Address Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Title:	RTICLE IV SHA	<u>RES</u> 100		
Name and Title: Address 19723 Brickel Point Dr. Address:	ne number of shares	of stock is:		
Name and Title: Address 19723 Brickel Point Dr. Address: Boca Raton, Fl. 33498 Name and Title: Name and Title: Address Name and Title: Address Name and Title: Address Name and Title: Address Name and Title: Address: Address: Name and Title: Address: Address:				
Address 19723 Brickel Point Dr. Address:				
Name and Title: Name and Title: Nicholas Osher, Secretary Name and Title:	Name and T	itle:	Name and Title:	
Name and Title: Address Name and Title: Nicholas Osher, Secretary Name and Title:	Address	19723 Brickel Point Dr.	Address:	
Name and Title: Address 12654 Torbay Dr. Address:				
Name and Title: Address Name and Title: Name and Title:			 	
Name and Title: Address 12654 Torbay Dr. Address:				
Name and Title: Address 12654 Torbay Dr. Address:		Niekolos Oekas Soomtass		
Name and Title: Address: Name and Title: Address: Address: Name and Title: Address: Address: Name and Title: Address: Address:	Name and Ti	le: Nicholas Osher, Secretary	Name and Title:	·····
Name and Title: Address Address: Name and Title: Address: Name and Title: Part 29 Part	Address	12654 Torbay Dr.	Address:	
Name and Title: Address: Address: Name and Title: Name		Boca Raton, FL 33428	***************************************	
Name and Title: Address: Address: Address: Name and Title: Address: Ad				10-10-10-10-10-10-10-10-10-10-10-10-10-1
Address: Add				<u> </u>
Address: Add				7.0
	Name and Tit	le:	Name and Title:	***
	Address		Address:	N 100
	21001033		Zadress.	•
· · · · · · · · · · · · · · · · · · ·				(U)
<u> </u>				• =

Name and	l Title;	Name and Title:		
Address		Address:		
ARTICLE VI I	REGISTERED AGENT orida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Vcorp Agent Services, Inc.	_		
Address:	1200 South Pinc Island Road Plantation,			
	FL.33324			
ARTICLE VII INCORPORATOR		2025 MAR 2 SECKETA TALLEAD		
The name and ad	dress of the Incorporator is:	AR 2		
Name:	Gene Brusilovsky	્રે≐્ ળ ાૄ		
Address:	19723 Brickel Point Dr.			
	Boca Raton, FL 33498	- ECE 5.10		
Effective date, if c (If an effective di filing.) Note: If the date		not be more than five days prior or 90 days after the		
Having been nam	ed as registered agent to accept service of process amiliar with and accept the appointment as regist orp Agent Services, the	for the above stated corporation at the place designated in this		
	Required Signature/Registered Agent	Date		
document to the L	ument and affirm that the facts stated herein and penaltment of State constitutes a third degree feld techniques	re true. I am aware that the false information submitted in a my as provided for in s.817.155, F.S. Date		