P2500026391

FC 5.7.25

(Req	uestor's Name)			
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(City)	/State/Zip/Phone	<u>+</u>		
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PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer:			

Office Use Only



200447927842





Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com



ORDER FORM

TO Florida Department of State

FROM

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 5/6/2025

PRIORITY Regular Approval

OUR REF # (Order ID#) 1373001

ORDER ENTITY

LOZUN INNOVATION INC

PLEASE PERFORM THE FOLLOWING SERVICES:

LOZUN INNOVATION INC (FL)

New corp filing

NOTES:

\$70.00 Authorized

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RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, May 6, 2025 Page 1 of 1

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

ARTICLE I NAME The name of the corporation shall be: LOZUN INNO\	ATION INC
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
11120 HERON BAY BLVD APT 123	
CORAL SPRINGS FL, 33076	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	Consulting
	-
	17: 17: 15
ARTICLE IV SHARES The number of shares of stock is: 1,000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECT	<u>'ORS</u>
Name and Title: AMIR LOZUN, Presiden	Name and Title: AMIR LOZUN, Secretary
Address 11120 HERON BAY BLVD A	APT 123 Address: 11120 HERON BAY BLVD APT 12
CORAL SPRINGS FL. 33	3076 CORAL SPRINGS FL, 33076
Name and Title: AMIR LOZUN, CFO	Name and Title: AMIR LOZUN, Director
Address 11120 HERON BAY BLVD	APT 123 Address: 11120 HERON BAY BLVD APT 12
CORAL SPRINGS FL, 3	3076 CORAL SPRINGS FL, 33076
Name and Title:	Name and Title:
Address	Address:
	

Name an	d Title:	Name and Title:	
Address		Address:	
			
ARTICLE 17	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the street address of	ha maniana da cara ta	
Name:	AMIR LOZUN	ne registered agent is:	
Address:	11120 HERON BAY BLVD APT 123		
	CORAL SPRINGS FL, 33076		
<u>ARTICLE VII</u>	INCORPORATOR		
The name and ad	dress of the incorporator is:		
Name:	AMIR LOZUN		
Address;	11120 HERON BAY BLVD APT 12	3	
	CORAL SPRINGS FL, 33076		12
1071C1 C1/11			77.12:1 5
	EFFECTIVE DATE: other than the date of filing:	(OPTIONAL)	ั้งเ
(If an effective di filing.)	ate is listed, the date must be specific and cannot	be more than five days p	rior or 90 days after the
Note: If the date the document's ef	inserted in this block does not meet the applicable s fective date on the Department of State's records.	tatutory (illing requirement	s, this date will not be listed a
Having been nam certificate. I am fa	ed as registered agent to accept service of process for miliar with and accept the appointment as registered	the above stated corporation I agent and agree to act in i	on at the pluce designated in the this capacity
Amo			5/5/25
	Required Signature/Registered Agent		Date
l submit this doci document ye the D	iment and affirm that the facts stated herein are tr bepartment of State constitutes a third degree felony o	ue. I am aware that the fa is provided for in s.817.155	ulse informution submitted in 5, F.S.
17 Mil		·	5/5/25
tequired Signatur	e Incorporator	 [Da	