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(Business Entity Name)

(Document Number)

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2023 AUG 21 AM 10:54  
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

PLEASE use funds from this account: 120210000160 \$ 70.00

Authorization Signature: Jan Keller

Already Home Studios Corp

Business

Document #

**Certified Copy of**

**Certificate of Status**

**NEW FILINGS**

- Profit Corp
- Not for Profit
- Officer/Director
- Limited Liability
- Domestication
- Other
- CORP**
- LLLP**

**AMENDMENTS**

- Amendment
- Resignation of R.A.
- Change of Registered Agent
- Revocation of Dissolution
- Merger
- Conversion**
- Amended and restated Articles**
- Statement of FACT**

**OTHER FILINGS**

- Annual Report
- Fictitious Name
- COUNTRY  Other
- COUNTRY**

**REGISTRATION/QUALIFICATIONS**

- Foreign filing
- Limited Partnership
- Reinstatement

**EXAMINER'S INITIALS:** \_\_\_\_\_

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**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: Already Home Studios Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

6241 SW 30 STREET MIAMI FL 33155

848 BRICKELL AVE STE 1130 MIAMI FL 33131

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Isabella Roqué Name and Title: \_\_\_\_\_

Address 6241 SW 30 STREET Address: \_\_\_\_\_  
MIAMI, FL 33155

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

2023 AUG 21 PM 1:15

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: BLUEMAX PARTNERS CORP

Address: 848 BRICKELL AVE. STE 1130

MIAMI, FL 33131

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: BLUEMAX PARTNERS CORP

Address: 848 BRICKELL AVE. STE 1130

MIAMI, FL 33131

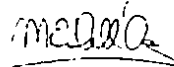
**ARTICLE VIII EFFECTIVE DATE:**

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*

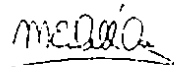


\_\_\_\_\_  
Required Signature/Registered Agent

08/18/2023

\_\_\_\_\_  
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.*



\_\_\_\_\_  
Required Signature/Incorporator

08/18/2023

\_\_\_\_\_  
Date

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