Division of Corporations

Florida Department_of State pages of the document. w) on the top and bottom of a (((H24000245395 3)))

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : USACORP INC. Account Number : I20130000019 Phone : (718)362-4789 Fax Number : (718)408-2550

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

DavidYearwoodJr@yahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION 262 Maple Corp.

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ARTICLES OF INCORPORATION

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

DESCRIPTION DESCRIPTION			··· · -	•	
TICLE II PRINCIPAL OFFICE Principal street address			Mailing address, if different is:		
614 Bonterra Blvd		· · · · · · · · · · · · · · · · · · ·			
alrico, FL 33594	T				
RTICLE III PURPOSE the purpose for which the corporate		Estate		****	
RTICLE V INITIAL OFFIC	CERS AND/OR DIRECTO	<u>R.S</u>			
	onterra Blvd	Name and Tith Address:			
	, FL 33594	. redress.			
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Name and Title: Address Name and Title:		Address: Name and Title		4 July -7 Pit 5: 06	

(((H24000245395.3))) Name and Title: Name and Title: _____ Address: Address <u> ARTICLE VI REGISTERED AGENT</u> The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: David Yearwood Name: 2614 Bonterra Blvd Address: Valrico, Fl. 33594 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: David Yearwood Name: 2614 Bonterra Blvd Address: Valrico, FL 33594 ARTICLE VIH EFFECTIVE DATE: Effective date, if other than the date of filing: (JAZOTTIONAL) (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/ David Yearwood 67/19/2024 Required Signature/Registered Agent 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 8,817,155, F.S. /s/ David Yearwood 07/19/2024 Required Signature/Incorporator Date

From: 17184082550 To: 18506176381 Date

Time 07/19/24 12:38PM Pages: 3 P: 3/3

07/19/2024 12:38