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Division of Corporations

Florida Department of State

Division of Corporations

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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.****

Email Address: JOJOMEKIBEL@GMAIL.COM

FLORIDA PROFIT/NON PROFIT CORPORATION KEY FUNDING INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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

ARTICLE I NAME KEY FUNDING INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6303 BLUE LAGOON DR, STE 400

1384 CONEY ISLAND AVE

MIAMI, FL 33126

BROOKLYN, NY 11230

ARTICLE III PURPOSE MANAGEMENT
The purpose for which the corporation is organized is:

ARTICLE IV SHARES 200
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIEL MEKIBEL, PRESIDENT

Name and Title:

Address 6303 BLUE LAGOON DR, STE 400

Address:

MIAMI, FL 33126

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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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: DANIEL MEKIBEL

Address: 6303 BLUE LAGOON DR, STE 400

MIAMI, FL 33126

ARTICLE VII INCORPORATOR

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

Name: DANIEL MEKIBEL

Address: 6303 BLUE LAGOON DR, STE 400

MIAMI, FL 33126

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 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

<u>/s/ DANIEL MEKIBEL</u>	<u>07/19/2024</u>
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 s.817.155, F.S.

<u>/s/ DANIEL MEKIBEL</u>	<u>07/19/2024</u>
Required Signature/Incorporator	Date

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