

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**P24000051984**Note: Please print this page and use it as a cover sheet. Top of the fax audit number
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : Y20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381**Enter the email address for this business entity to be used for future
annual report mailings. Enter only one email address please.**

Email Address: _____

2024 AUG 13 PM 5:20
REGISTRATION
SPECIAL
SERVICESFLORIDA PROFIT/NON PROFIT CORPORATION
UPPER HUDSON MANAGEMENT SOUTH INC.

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

2024 AUG 14 PM 1:12
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FLORIDA DEPT OF STATE
SPE. FL

Aug 14, 2024 4:54 PM

H240002732803

No. 1651 P. 2

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: UPPER HUDSON MANAGEMENT SOUTH INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
16315 VINTAGE OAKS LANE
DELRAY BEACH, FL 33484

Mailing address, if different is:
16315 VINTAGE OAKS LANE
DELRAY BEACH, FL 33484

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RONALD KESTENBAUM/PRES. Name and Title: _____

Address 16315 VINTAGE OAKS LANE Address: _____
DELRAY BEACH, FL 33484

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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FLORIDA

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H24 0002732803 No. 1651 P. 3

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: RONALD KESTENBAUM

Address: 16315 VINTAGE OAKS LANE

DELRAY BEACH, FL 33484

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LAWRENCE A. KIRSCH

Address: 41 STATE STREET STE 700

ALBANY, NY 12207

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TALLAHASSEE, FL

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

/s/ RONALD KESTENBAUM

Required Signature/Registered Agent

8/14/24

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.

Lawrence A. Kirsch
Required Signature/Incorporator

8/14/24
Date