

Florida Department of State

**P25000002997**

Division of Corporations  
Electronic Filing Cover Sheet

FL  
1-15-25

Note: Please print the page number used as a cover sheet. The fax audit number (shown below) on the top and bottom of all pages of the document.

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

From:  
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

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

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80: JAN 14 PM 4:08

FLORIDA PROFIT/NON PROFIT CORPORATION  
NORTH PROPERTY INVEST CORP

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 (Profit)

**ARTICLE I NAME:** The name of the corporation is:

North Property Invest Corp

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

19611 NE 18 PL

Miami, FL 33179

**ARTICLE III SHARES:** The number of shares of stock is: 1,000

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Muro Payro, Mario

PRESIDENT

**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

3 Hills Management LLC

19611 Ne 18 PL, Miami FL 33179

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

3 Hills Management LLC

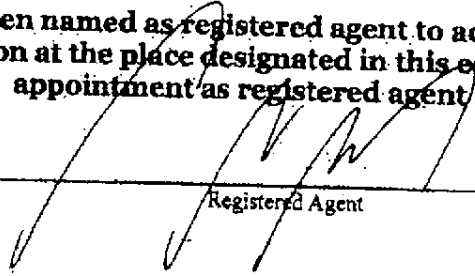
19611 Ne 18 PL, Miami FL 33179

2014 JAN 14 PM 4:08

JD

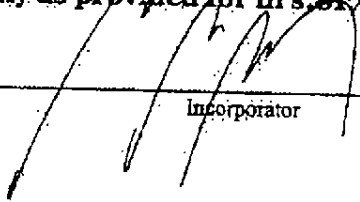
**Required Signatures:**

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

  
 \_\_\_\_\_  
 Registered Agent

\_\_\_\_\_ 01/13/2025  
 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.

  
 \_\_\_\_\_  
 Incorporator

\_\_\_\_\_ 01/13/2025  
 Date

2015 JAN 16 PM 4:08  
 STATE  
 FILE