## P25000003251

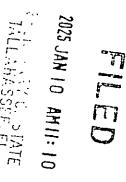
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## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: U	JARRIOR KÔR, IN	L	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY RECHIRED
FROM:	STEPHEN BOERE	NKO (Printed or typed)	
	1165 S COURTENA	•••	
	MERRITT ISLAN City.	D FL 3295	<u></u>
	321 - 607 - 1084 Daytime To	elephone number	
	SBOERENKORCE E-mail address: (to be used	L. 22, COM	otification)

NOTE: Please provide the original and one copy of the articles.

2025 JAN 10 AMII: 10

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

ARTICLE I NAMI The name of the corpora	E ation shall be:	いそびかい	DR KÔ	R, INC		
ARTICLE II PRIN	CIPAL OFFICE Principal <u>street</u> ad	dress			Mailing address, if different is:	
11655C	PANSTAVO	PKMY	<del></del>			
MERRITT	15LAND 5	L 3295	52			
ARTICLE III PURP The purpose for which	OSE			) てとい	ck vendor	
		:				
				<del></del>		
<del> </del>						
	<u>.</u>			···		
ARTICLE IV SHAI The number of shares o	RES f stock is:	<del></del>			·	
RTICLE V INITI	AL OFFICERS AN	' <u>D/OR DIREC</u>	CTORS		- PRESIDENT	
Name and Tit	le: STEPITE	J BOE	RENKO	Ciame and Title	s:	
Address	1165 S. Ca MERRITT	rtichty	Trwy	Address:		
			+L			
	32952					
Name and Title	e:	<u> </u>		Name and Title	e:	
Address			_	Address:		
			<u>-</u>			
Name and Titl	e:	<del></del>		Name and Title	e: 2025	
Address				Address:	S. A.	
			··		\$ c c S	
					II: 10 STATE FL	*

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT accepta	able) of the registered again is	
Name:	STEPHEN BOERENK	LO	~2
Address:	1165 S. COURTENAY IX	wy	025 J
	1165 S. COURTENAY IX MERRITT ISYND, FL 3.	2952	
ARTICLE VII	<u>INCORPORATOR</u>		TALL/FASSES/FL
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	STEPHEN BOERENK	<u>0</u>	, if 0
Address:	1165 S. COUZTENAY	Sknot	
	1165 S. COUZTENAY MURZITT ISLAND, FL	32952	
Effective date, if of	EFFECTIVE DATE: other than the date of filing: 12-14 ate is listed, the date must be specific and	- 202년 . (OPTION) cannot be more than five day	AL) s prior or 90 days after the
Note: If the date the document's ef	inserted in this block does not meet the appl fective date on the Department of State's rec	icable statutory filing requirements	ents, this date will not be listed as
Having been name certificate, I am fa	ed as registered agent to accept service of pro minar with and accept the appointment as re	cess for the above stated corpor gistered agent and agree to act	ation at the place designated in this in this capacity
	roh J. Zomato		12-30-202-
	Required Signature/Registered Agen		24.0
I submit this docu document to the D	ment and affirm that the facts stated herei. epartment of State constitutes a third degree	n are true. I am aware that the felony as provided for in s.817.	e false information submitted in a 155, F.S.
Paguinale	her J. Social		12-30-2024
Required Signatur	e/incorporator		Date