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**P2500000445**

Florida Department of State  
Division of Corporations  
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Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
SUREFIRE LOGISTICS OF FLORIDA INC**

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

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No. 2138 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: SUREFIRE LOGISTICS OF FLORIDA INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

14523 MIRASOL MANOR COURT  
TAMPA, FL 33626

Mailing address, if different is:

14523 MIRASOL MANOR COURT  
TAMPA, FL 33626

ARTICLE III PURPOSE

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

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BRIAN SCOTT/PRESIDENT

Address: 5706 INTERBAY BLVD  
TAMPA, FL 33611

Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_

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

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: BRIAN SCOTT  
 Address: 5706 INTERBAY BLVD  
TAMPA, FL 33611

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LAWRENCE KIRSCH  
 Address: 41 STATE STREET STE 700  
ALBANY, NY 12207

**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/ BRIAN SCOTT 1/27/2025  
 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.*

Lawrence A. Kirsch 1/27/2025  
 Required Signature/Incorporator Date