

2/4/25 11:16 AM

Division of Corporations

P25000006301

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : ELO ENTERPRISES, INC

Account Number : 120150000109

Phone : (561)544-8862

Fax Number : (954)697-0130

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

Email Address: sales@eloenterprises.us

FLORIDA PROFIT/NON PROFIT CORPORATION UNIVEGA SOLUTIONS INC

Certificate of Status	0
Certified Copy	0
Page Count	01
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: UNIVEGA SOLUTIONS INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

4700 NW BOCA RATON BLVD #202BOCA RATON, FL 33431**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: 1000 with US\$0.10 per value**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JODI PRESCOT IMMANUEL OJOJODIMEDJO - P.S Name andAddress 4700 NW BOCA RATON BLVD #202

Address:

BOCA RATON, FL 33431Name and Title: CHARLON CHARLES CLIFTON POMPIER - VP,T

Name and Title:

Address 4700 NW BOCA RATON BLVD #202

Address:

BOCA RATON, FL 33431

Name and Title: Name and Title:

Address

Address:

Name and Title: _____ Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: ELO ENTERPRISES, INC.Address: 4700 NW BOCA RATON BLVD #202BOCA RATON, FL 33431ARTICLE VII INCORPORATORThe name and address of the Incorporator is:Name: JODI PRESCOT IMMANUEL DIOJODIMEDJOAddress: 4700 NW BOCA RATON BLVD #202BOCA RATON, FL 33431ARTICLE 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

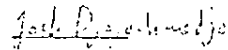


Required Signature/Registered Agent

02/03/2025

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.

02/03/2025

Required Signature/Incorporator

Date