

FEB 25 2025 1:00PM

No. 2225 F 1

P25000001178

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
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: _____

RECEIVED

2025 FEB 25 PM 4:41

FLORIDA PROFIT/NON PROFIT CORPORATION
LEAD X TESTING & SOLUTIONS INC.

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

2025 FEB 25 AM 2:57
STATE

MA

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: LEAD X TESTING & SOLUTIONS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

501 NE 31 STREET UNIT 1102

MIAMI, FL 33137

Mailing address, if different is:

501 NE 31 STREET UNIT 1102

MIAMI, FL 33137

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: ZINA KHADER/PRESIDENT

Address: 501 NE 31 STREET UNIT 1102

MIAMI, FL 33137

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Feb. 25. 2025 4:33PM

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No. 2225 P. 9

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: ZINA KHADER
Address: 501 NE 31 STREET UNIT 1102
MIAMI, FL 33137

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/ ZINA KHADER

Required Signature/Registered Agent

2/25/2025

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.

Lawrence A Kirsch

Required Signature/Incorporator

2/25/2025

Date