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Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
SYNTAX TECHNOLOGIES INC

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

2020 NOV 16 AM 11:05

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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: SYNTAX TECHNOLOGIES INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7452 SW 48 STREET
MIAMI, FL 33135

8760 SW 87 STREET
MIAMI, FL 33173

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INFORMATION TECHNOLOGY SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LYDIA LOYOLA DOPICO PRESIDENT Name and Title: _____

Address 8760 SW 87 STREET Address: _____
MIAMI, FL 33173

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

20 NOV 16 2020

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: LYDIA LOYOLA DOPICO
 Address: 8760 SW 87 STREET
MIAMI, FL 33173

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: LYDIA LOYOLA DOPICO
 Address: 8760 SW 87 STREET
MIAMI, FL 33173

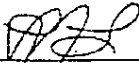
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/01/2021 (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

 _____ 11/12/2020
 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.

 _____ 11/12/2020
 Required Signature/Incorporator Date