

**P2000092123**  
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 : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

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

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

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**EBS Holding Corp.**

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

2020 DEC -2 PM 3:00

2020 DEC -2 PM 1:21

**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: **EBS Holding Corp.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address Mailing address, if different is:  
181 Commodore Drive, Jupiter, FL 33477

**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: 1,000 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:  
Address:

**ARTICLE VI REGISTERED AGENT**

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

Name: National Registered Agents, Inc.  
Address: 1200 South Pine Island Road  
Plantation, FL 33324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Janis S. DiMonaco  
Address: 181 Commodore Drive, Jupiter, FL 33477

**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*

Dena Weaver, Assistant Secretary for  
*Dena Weaver* National Registered Agents, Inc.  
Required Signature/Registered Agent Date 12/01/2020

*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.*

*James A. LUDWIG 12/1/2020*

: Required Signature/Incorporator Date

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