

P22 000002948

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000017977 3)))



H220000179773ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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

Email Address: _____

2022 JAN 13 PM 3:22

FLORIDA PROFIT/NON PROFIT CORPORATION
GRAFIKO, INC.

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

2022 JAN 13 AM 8:44

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME: The name of the corporation is:

Grafiko, Inc.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

6619 South Dixie Highway, #599
Miami, FL 33143

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Anke Patricia Knaack (P)

2022 JAN 13 AM 8:44

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

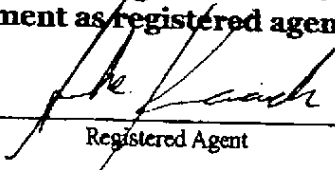
Anke Patricia Knaack
6619 South Dixie Highway, #599
Miami, FL 33143

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Anke Patricia Knaack
6619 South Dixie Highway, #599
Miami, FL 33143

Required Signatures:

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

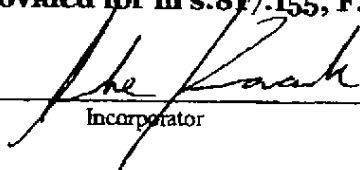


 Registered Agent

01/13/2022

 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.



 Incorporator

01/13/2022

 Date

2022 JAN 13 AM 8:44
 30