Division of Corporations

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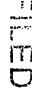
FLORIDA PROFIT/NON PROFIT CORPORATION **GAHPE CORPORATION**

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

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Fax: 19546784500 To:

Required Signature/Incorporator

Name and	Title:	Name and Title:	
Address		Address:	
	<u>EGISTERED AGENT</u> rida street address (P.O. Box NOT accep	nable) of the registered agent is:	
Name:	JTAX CORP		
Address:	23123 STATE RD 7 STE 315		
	BOCA RATON, FL 33428		
ARTICLE VII L	<u>NCORPORATOR</u>		
The name and add	<u>Iress</u> of the Incorporator is:		
Name:	JTAX CORP		1823
Address:	23123 STATE RD 7 STE 315		HAY 2
	BOCA RATON, FL 33428		25 P
ARTICLE VIII Effective date, if o	EFFECTIVE DATE: ther than the date of filing: te is listed, the date must be specific an	(OPTIONAL)	
(If an effective da filing.)	te is listed, the date must be specific an	d cannot be more than five days prid	or or 90 days after the
	nserted in this block does not meet the ap fective date on the Department of State's		this date will not be listed as
	ed as registered agent to accept service of p miliar with and accept the appointment as		
			05/25/2023
	Required Signature/Registered Ag	ent	Date
	ment and affirm that the facts stated he epartment of State constitutes a third degr		

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Date