# P0/000082125

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



SUBJECT:	SagAire, Inc. (PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u>		
	`	:-l6:	d a chaole fam
Enclosed are an ong	inal and one (1) copy of the arti	cies of incorporation and	a cneck for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	
FROM:	Robin A. William Name (	S (Printed or typed)	.::
	11184 Mandarin Street Address		······································
	Boca Raton, FL 33428		_
_	City, State & Zip		

561-750-8535

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

### 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:

SagAire, Inc,

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

11184 Mandarin Street Boca Raton, FL 33428

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business Services

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Robin A. Williams, President

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Robin A. Williams 11184 Mandarin Street Boca Raton, FL 33428

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Robin A. Williams 11184 Manadarin Street Boca Raton, FL 33428

2004 1140011, 11 3341	
**************	**********
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered o	
Robin a Williams	8/14/01
Signature/Registered Agent	Date
Robin a. Williams	8)14/01
Signature/Incorporator	Date