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Florida Department of State
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TO:

Division of Corporations
Fax Number : (850)205-0381

FROM:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

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FLORIDA PROFIT CORPORATION OR P.A.
EVEABE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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J. Shivers OCT 21 2005

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ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**ARTICLE I NAME**

The name of the corporation shall be:

EVEABE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

201 NE 15TH TERRACE, SUITE 209
DEERFIELD BEACH, FL 33441**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers:

Director, President &
Treasurer:MITCHELL LEVIN ; 4332 BOCAIRE BLVD BOCA
RATON, FLORIDA 33487Director, Vice-President &
Secretary:LOIS LEVIN ; 4332 BOCAIRE BLVD BOCA RATON,
FLORIDA 33487CLERK OF DISTRICT COURT
STATE OF FLORIDA

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PAGE 2 EVEABE, INC.

ARTICLE VI REGISTERED AGENT

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

MITCHELL LEVIN
4332 BOCAIRE BLVD
BOCA RATON, FLORIDA 33487

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

MITCHELL LEVIN
4332 BOCAIRE BLVD
BOCA RATON, FLORIDA 33487

Having been named as registered agent to accept service of process for the above 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.


MITCHELL LEVIN / Registered Agent

10/19/05
Date


MITCHELL LEVIN / Incorporator

10/19/05
Date

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TALLAHASSEE, FLORIDA

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