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(Re	questor's Name)			
•	,,			
(Ad	dress)			
(Ad	dress)			
·	·			
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
	,			
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
	Office Use On	ly /		
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· COVER LETTER

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

SUBJECT:	Steam Geni				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)					
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,		
C	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of		
		ADDITIONAL CO	Status PPY REQUIRED ————		
FROM:	Brian Cser	csevits			
Name (Printed or typed)					
4089 Crossroads Place					
	•				
_	Casselberry	FL 3270	アフ		
Ćity, State & Zip					
-	407 947				
Daytime Telephone number					

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

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
A STATE OF THE STA	2007 HAY -9 SECRETAR)
ARTICLE I NAME	50 3
The name of the corporation shall be:	HAY RET AHJ
Steam Genie Inc.	AR -1
ARTICLE II PRINCIPAL OFFICE	2007 HAY -9 PM 12: 3: SECRETARY OF STAIL
The principal place of business/mailing address is:	101 LS 125 .
4089 Crossroads Place	<u> </u>
Casselberry, FL 32707	Ţ
Casserberry, I'm	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
General Business	
Gereral Dustrics)	
	•
ARTICLE IV SHARES	
The number of shares of stock is:	
100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
	4. 4
Brian Csercsevits - Presi	dent
4089 Crossroads Place	
,	
Casselberry, FL 32707	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the regi	stered agent is:
Brian Csercsevits	20.44 98411 121
4089 Crossroads Place	
Casselberry, FC 32707	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Brian Csercsevits	
4089 Crossroads Place	
Casselberry, FL 32707	
***************************************	*******
Having been named as registered agent to accept service of process for the above stated co-	rporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to ac	
R / -	. 104/20
- De (male	4/24/07
Signature/Registered Agent	Date,
BCA	41 24/17
- I for which a	1 11/

Date

Signature/Incorporator