## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Emmil Address:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160 : (800)494-3124

Fax Number

: (561)455-9885

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

## FLORIDA PROFIT/NON PROFIT CORPORATION

Sara's Palace Co.

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Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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## 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:

SARA'S PALACE CO.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

415 NE 2ND STREET #204 HALLANDALE, FLORIDA 33009

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: 1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (ontional)

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

DIRECTOR, PRESIDENT KATHLEEN VIAUD 415 NE 2ND STREET #204 HALLANDALE, FLORIDA 33009

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PAGE 2 SARA'S PALACE CO.

ARTICLE VI REGISTERED AGENT

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

KATHLEEN VIAUD 415 NE 2ND STREET #204 HALLANDALE, FLORIDA 33009

ARTICLE VII INCORPORATION

The name and Florida street address of the incorporator is:

KATHLEEN VIAUD 415 NE 2ND STREET #204 HALLANDALE, FLORIDA 33009

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,

ÉEN VIAUD / Registered Agent

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