

**P120000005520**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H12000013166 3)))



H120000131663ABCU

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
EVANTAGE USA, INC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$78.75 |

**RECEIVED**  
12 JAN 17 AM 8:54  
DIVISION OF CORPORATIONS

**FILED**  
12 JAN 17 PM 12:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help Burch JAN 18 2012

H12000013166

**COVER LETTER**

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

**SUBJECT: EVANTAGE USA, INC.**

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check 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: BRANDON KAPLAN**

Name (Printed or typed)

**1111 LINCON RD, STE 400**

Address

**MIAMI BEACH, FLORIDA 33139**

City, State & Zip

**(305) 538-1406**

Daytime Telephone number

**bkaplan@evantagebikes.com**

E-mail address: (to be used for future annual report notification)

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

H12000013166

H 120000 13166

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

**ARTICLE I NAME** EVANTAGE USA, INC  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
1111 Lincoln Road, Ste 400  
Miami FL 33139

Mailing address, if different is:  
1111 Lincoln Road, Ste 400  
Miami FL 33139

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:

Any and all lawful business

**ARTICLE IV SHARES**  
The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

|                                   |                       |
|-----------------------------------|-----------------------|
| Name and Title: Brandon Kaplan    | Name and Title: _____ |
| Address: 1111 Lincoln Rd, Ste 400 | Address: _____        |
| Miami FL 33139                    | _____                 |
| _____                             | _____                 |
| Name and Title: _____             | Name and Title: _____ |
| Address: _____                    | Address: _____        |
| _____                             | _____                 |
| Name and Title: _____             | Name and Title: _____ |
| Address: _____                    | Address: _____        |
| _____                             | _____                 |

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Peter J. Yanowitch  
Address: 2903 Salzedo Street, #2  
Coral Gables FL 33134

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Brandon Kaplan  
Address: 1111 Lincoln Rd, Ste 400  
Miami FL 33139

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

Required Signature/Registered Agent

01-16-12  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

1/14/12  
Date

FILED

12 JAN 17 PM 12:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H 120000 13166