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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUL 31 PM 8:03

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Gilbert, Sylvia A.

From: marischa versteegh <mversteegh2@gmail.com>
Sent: Wednesday, July 31, 2013 4:56 PM
To: Gilbert, Sylvia A.
Subject: Palzicht INC.

Dear Mrs Gilbert,

I hereby release the Florida Department of State with reference to the formation of Palzicht INC who is the MGRM of Palmzicht LLC.

Sincerely,
Marischa Versteegh
registered agent Palmzicht LLC and Palzicht INC.

COVER LETTER

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

SUBJECT: Palmzicht, 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: Marischa Versteegh

Name (Printed or typed)

1200 West Avenue Apt. TS 5

Address

Miami Beach, FL 33139

City, State & Zip

305 924 0686

Daytime Telephone number

rconitzer@gmail.com

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

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

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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: Palmzicht, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1200 West Avenue Apt. TS 5

Miami Beach, FL 33139

USA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful purpose.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ruben Conitzer CEO&President

Name and Title: _____

Address 1200 West Avenue Apt. 1231

Address: _____

Miami Beach, FL 33139

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

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: Marischa Versteegh

Address: 1200 West Avenue Apt. 517

Miami Beach, FL 33139

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Marischa Versteegh

Address: 1200 West Avenue, Apt 517

Miami Beach 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

07/11/2013
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

07/11/2013
Date