

P/3000099816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

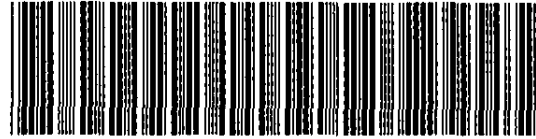
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

*K 12/17/13*



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 924266 4609278

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : December 16, 2013

ORDER TIME : 12:53 PM

ORDER NO. : 924266-005

CUSTOMER NO: 4609278

DOMESTIC FILING

NAME: LIFE ARK CORPORATION

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
       ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

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

SUBJECT: Life Ark Corporation

(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: Nicholas Arons

Name (Printed or typed)

675 Third Avenue, 26th Floor

Address

New York, NY 10017

City, State & Zip

212-682-1800

Daytime Telephone number

narons@ghsklaw.com

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

**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)

**ARTICLE I    NAME**

The name of the corporation shall be: Life Ark Corporation

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

675 Third Avenue, 26th Floor

New York, NY 10017

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: to hold real estate.

**ARTICLE IV    SHARES**

The number of shares of stock is: 200

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

Name and Title: Renata De Paula Seripieri - Director

Name and Title: \_\_\_\_\_

Address: Praca Pereira Coutinho 51, Apto 221

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

VL Nova Conceicao

Sao Paulo, Brasil

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

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CLERK OF THE STATE  
TALLAHASSEE, FLORIDA

(cont)

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: Corporation Service Company  
Address: 1201 Hays Street  
Tallahassee, FL 32301

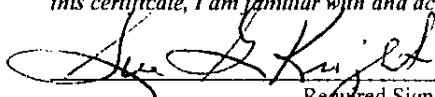
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TALLAHASSEE FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Richard L. Herrmann  
Address: 675 Third Avenue, 26th Floor  
New York, NY 10017

*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*

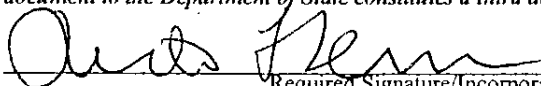


**Sue G. Knight**  
**Assistant Vice President**

Required Signature/Registered Agent

12-16-2013  
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

12-16-13  
Date