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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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

_{subject:} Stei	rility Control Inc.		
~ 0 0 0 0 1 0 1 1	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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 CO	PY REQUIRED
	ason Zielinski Es Nam D0 E. Broward Bl	e (Printed or typed)	
		Address	
F	ort Lauderdale, F		
	•	State & Zip	
9	54-524-6131		
	Daytime 1	Telephone number	
<u>j</u> zi	elinski@zielinski-as		
	E-mail address: (to be use	ed 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 The name of the co	NAME Sterility Control Incorporation shall be:	D.	
ARTICLE II 800 E Brov	PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
		 ,	
Suite 700			
	erdale, FL 33301		
ARTICLE III The purpose for w	PURPOSE Ahich the corporation is organized is: all legal	business	pursuits.
	· · · · · · · · · · · · · · · · · · ·		
			○ 名前 - の表示 - のおれて のお前 2000年
			- C.G.
ARTICLE V	SHARES 17,000,000 INITIAL OFFICERS AND/OR DIRECTOR d Title: Jaimee Wolf - Director		James Clayton Wardlaw - Director
	800 E. Broward Blvd	Name and Title	800 E. Broward Blvd
Address	Suite 700	_ Address:	Suite 700
	Fort Lauderdale, FL 33301		Fort Lauderdale, FL 33301
Name and	l Title:	Name and Title	: <u> </u>
Address		_ Address:	
		-	
Name and	I Title:	Name and Title	s:
Address	 	_ Address:	
		•	

Name an	d Title:	Name and Title:	
Address		Address:	
		.	
		.	
ARTICLE VI	REGISTERED AGENT		
The <u>name and F</u>	orida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Jason Zielinski, Esq.		
Address:	800 E Broward Blvd Suite 702		
	Fort Lauderdale, FL 33301		
ARTICLE VII	INCORPORATOR		
The <u>name and a</u>	Idress of the Incorporator is:		
Name:	Jason Zielinski, Esq.		
Address:	800 E Broward Blvd. Suite 702		
	Fort Lauderdale, FL 33301		
	ned as registered agent to accept service of process am familiar with ana accept the appointment as reg	istered agent and agree	
	Required Signature/Registered Agent		Date
	tument and affirm that the facts stated herein are	true. I am aware that t	he false information submitted in (
i submit this doe document to the	Department of State c onstitutes a third degree felon	y as proviaea for in s.81	7.133, F.S.
i submit this age document to the	Department of State constitutes a third degree felon	y as proviaea for in s.81 	7.733, F.S. 12-9-14