P15000001710

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Mr. Sasson wanted 10 shores added.				
10 Shares action.				
1/7/15				
4015-109 PT				



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12/30/14--01007--001 **78.75

15 JAN -6 PM 4: 23
SECRETARY OF STATE
SECRETARY OF STATE



Office Use Only



COVER LETTER

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

SURJECT: SAS	SSON HOLDING	S, INC			
50B02C11	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation an	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	OPY REQUIRED		
FROM: M	EIR SASSON				
1 KOWI	Nam	e (Printed or typed)	.		
20	20855 NE 16TH AVENUE SUITE C16				
N	ORTH MIAMI BE	Address EACH, FL 331	79		
	City, State & Zip				
95	548719157				
	Daytime Telephone number				

meir@heatswimwear.com

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

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

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



The name of the corp	poration shall be: SASSON HOLDIN	IG, INC	15 JAN -6 PH 4: 23
ARTICLE II F	PRINCIPAL OFFICE Principal street address STH AVENUE SUITE C16		Mailing ad SECRIF diffia confiss TATE IALLAHASSEE, FLORIDA
NORTH MI	AMI BEACH, FL 33179		
ARTICLE III P	URPOSE ch the corporation is organized is:	of holding	real property.
ARTICLE IV S The number of shares	SHARES OF Stock is: 10		
	NITIAL OFFICERS AND/OR DIRECTOR	-	NI/Δ
Name and T Address	MEIR SASSON 3131 NE 188TH APT 1809	Name and Title Address:	11//4
	AVENTURA, FL 33180		
Name and Ti	itle: N/A	Name and Title	N/A
Address		Address:	
	NI/A		Ν/Λ
Name and Ti			
Address		Address:	



(conti.)

Name a	nd Title: N/A	Name and Title	N/A PA 4: 24
Addres	ss	Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	the registered age	ant in
Name:	MEIR SASSON	me registered age	ait is.
Address:	3131 NE 188TH APT 1809		
	AVENTURA, FL 33180		
<i>ARTICLE VII</i> The <u>name and a</u>	INCORPORATOR address of the Incorporator is:		
Name:	MEIR SASSON		
Address:	3131 NE 188TH APT 1809		
	AVENTURA, FL 33180		
	med as registered agent to accept service of process am familiar with and accept the appointment as regi		
	M_{u_0}		JAN 5, 2015
	Required Signature/Registered Agent	····	Date
	cument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		
	Men >		JAN 5, 2015
	Required Signature/Incorporator		Date