

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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## FLORIDA PROFIT/NON PROFIT CORPORATION

NT Services Holding Company, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

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Help

## **COVER LETTER**

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

SUBJECT: NT	NT Services Holding Company, Inc.			
	(PROPOSED CORPORA	ATÉ NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:	
S70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fcc, Certified Copy & Certificate of Status	

FROM:	Scott E. Swartz, Esq WALTER HAVERFIELD LLP		
11103.2	Name (Printed or typed)		
	1301 E. 9th Street, Suite #3500		
	Address		
	Cleveland, OH 44114		
City, State & Zip			
	(216) 928-2932		
Daytime Telephone number			
	raphaelt@cheservices.com  E-mail address: (to be used for future annual report notification)		
	Primit and east to be seed for total attitual report troutestion)		

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



15 FEB -4 AH 10: 26

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

The name of the corporation shall be: NT Services Holding Company, Inc.			
INCIPAL OFFICE Principal street address AKOS Drivo	Mailing address, if different is:	-	
FL 33014			
ay be formed in the State of	Florida.	which	
5854 Miami Lakes Drive	Address:		
Miami Lakes, FL 33014			
FI	_ Name and Title:		
	Address:		
e:	Name and Title:		
	_		
	Principal street address akes Drive FL 33014  POSE the corporation is organized is: To engage ay be formed in the State of stock is: 100  TIAL OFFICERS AND/OR DIRECTO: Nathan Treitel, President/Directo: 5854 Miami Lakes Drive Miami Lakes, FL 33014	Principal street address Principal street address  akes Drive  FL 33014  POSE the corporation is organized is:  To engage in any lawful act or activity for ay be formed in the State of Florida.  ARES [stock is:	



(4/4)

15 FEB -4 AM 10: 26

(conti.)

SECRETA LY OF STATE TAIL AHASSEE FLORIDA

Name	and Title:	Name and Title:
Addre		Address:
RTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	the conjetered arent is:
ame:	C T CORPORATION SYSTEM	шь сединест авет із.
ddress:	1200 South Pine Island Road	
	Plantation, FL 33324	
RTICLE VI	I INCORPORATOR	
c name and	address of the Incorporator is:	
Name:	Scott E. Swartz, Esq WALTER HAVERFIELD LLP	
Address:	1301 E. 9th Street, Suite #3500	
	Cleveland, OH 44114	
	amed as registered agent to accept service of process I am fantitiar with and accept the appointment as reg  Kristin Bol	
FN	Assistant Sec	
	Required Signature/Registered Agent	Date
	ocument and affirm that the facts stated herein are a learning that the facts stated herein are a learning to the facts at the facts of State constitutes a third degree felong	true. I am aware that the false information submitted in a y as provided for in s.817.153, F.S.
	batter by	2-4-2015
	Required Signature Incorporator	Date