

From:

6/22/2015

P15000053485

Division of Corporations

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES  
Account Number : 075350000353  
Phone : (800)221-2972  
Fax Number : (888)692-9256

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FLORIDA PROFIT/NON PROFIT CORPORATION

Rasgon Labs, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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#594 P.002/003

### 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: Rasgon Labs, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
548 South Drive  
Miami Springs, Florida 33166

Mailing address, if different is:  
548 South Drive  
Miami Springs, Florida 33166

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To transact any and all lawful activity for which a corporation may be formed.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Rene Saroza Name and Title: \_\_\_\_\_

Address: 110 Morris Street #4R Address: \_\_\_\_\_

Jersey City, NJ 07302 \_\_\_\_\_

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

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

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

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

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#594 P.003/003

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: BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.  
Address: 155 Office Plaza Drive, 1st Fl.  
TALLAHASSEE, FL 32301

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Ana Maisonneuve  
Address: 16 Court St, 14th Fl  
Brooklyn, N.Y. 11241

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*  
Asst. Secretary, Lauren DePass

*Lauren DePass*  
Required Signature/Registered Agent

06/22/2015  
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.817.133, F.S.*

*Ana Maisonneuve*  
Required Signature/Incorporator

06/22/2015  
Date