

From:

P16000016651

02/22/16 11:00 AM P.001003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000045314 3)))



H160000453143ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

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

FILED
16 FEB 22 AM 11:00
STATE
DIVISION OF CORPORATIONS

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

Premier IT Networks, Inc

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

FILED
16 FEB 22 PM 3:55
STATE
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

2/23/16

From:

02/22/2016 14:48

#301 P.002/003

FILED

16 FEB 22 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Premier IT Networks, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4931 SW 35TH TERRACE

FORT LAUDERDALE, FL 33312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct all activities set forth and permitted under and Florida corporation law

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TZAHI ZLIKHA

Name and Title:

Address 4931 SW 35TH TERRACE

Address:

FORT LAUDERDALE, FL 33312

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

From:

02/22/2016 14:48

#301 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: TZAH ZLIKHA
Address: 4931 SW 35TH TERRACE
FORT LAUDERDALE, FL 33312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TZAH ZLIKHA
Address: 4931 SW 35TH TERRACE
FORT LAUDERDALE, FL 33312

FILED
16 FEB 22 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

X [Signature]
Required Signature/Registered Agent

2/9/16
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.

X [Signature]
Required Signature/Incorporator

2/9/16
Date