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(0,		
(Requestor's Name)		
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(City/	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Na	me)
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/Dee:	ıment Number	<u></u>
(1000)	ament Number	,
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	
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Office Use Only



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TOTAL PH 2: 15

11/10/16

COVER LETTER

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

SUBJECT:	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	UDE SUFFIX)		
Enclosed are an orig	rinal and one (1) copy of the arti	cles of incorporation and	l a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status		
FROM:	Robert Sir Name 222 Yamato)(- 220		
		n FL 3343 State & Zip			
		06-7053 elephone number			
	Robeall coast prop E-mail address: (to be used	erty group (om i for future annual report i	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)

The name of the corporat	ion shall be: Robert Sin	ofsky, PF	1		
ARTICLE II PRINC	IPAL OFFICE Principal street address	1	Mailing address, if different is:		
	o Road, Svite 106-220				<u> </u>
130ca Kato	n, FL 33431				
ARTICLE III PURPO The purpose for which th	esE ne corporation is organized is: Broke	er real e	'state transa	ctions	•
				29.6	
		· · · · · · · · · · · · · · · · · · ·		773	
				- AON	SON PARK
					- 18
ARTICLE IV SHARI				PH 2:	:C
The number of shares of	SLOCK IS: 100	<u></u>		: :	호텔 : :
	L OFFICERS AND/OR DIRECTORS				`,
Name and Title	Robert Sinotsky officer	Name and Title	•		
Address	222 Yamato Road	_ Address:		· · · · · · · · · · · · · · · · · · ·	
	Svite 106-220	_			
	Boca Raton, FL 33431				
Name and Title:	The state of the s	Name and Title	:	····	<u>_</u>
Address		_ Address:			
		_			
Name and Title		Nome and Title			
Address		_ Address;			
		-			—
		-			

Name and	Title:	Name and Title:	
Address		_ Address:	
ADTICLE I/I D	EGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	Robert Sinofsky		
Address:	222 Yamato Road, Sui-	le 106-220	31 K
	Baca Raton, FL 33431	_	
ARTICLE VII	NCORPORATOR		1
The name and add	Iress of the Incorporator is:		
Name:	Robert Sinofsky	-	2: 15
Address:	222 Yamato Road, Si	vite 106-220	, ,
	Buca Raton, FL 3343)	1	
Effective date, if o	EFFECTIVE DATE: ther than the date of filing: te is listed, the date must be specific and canno		orior or 90 business
	nserted in this block does not meet the applicable ective date on the Department of State's records.	statutory filing requirements, this da	te will not be listed as
Having been name this certificate, Na	eflas registered agent to accept service of process in familiar with and accept the appointment as reg	s for the above stated corporation at gistered agent and agree to act in this	the place designated in capacity
	Require Circumstance A court		1/1/2016
document to the D	Required Signature/Registered Agent ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon ed Signature/Incorporator	true. I am aware that the false info ty as provided for in s.817.155, F.S.	rmation submitted in a
•	obert Sinofsky (