Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353 : (800)221-2972 Phone Fax Number : (888)692-9256

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Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

Swaze Service Corp.

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MAR - 9 2017

ARTICLES OF INCORPORATION

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

<u>ARTICLE I NAME</u>	Swaze Service Com		
The name of the corpora	tion shall be: Swaze Service Corp.	······································	
ARTICLE II PRINC		Mailing ac	ddress, if different is:
22552 Esplanada Circle	e W.	22552 Esplanada (Circle W.
Boca Raton, FL 33433		Boca Raton, FL 33	433
ARTICLE III PURPE The purpose for which t may be formed.	<u>2SE</u> he corporation is organized is:	act any and all lawful activity fo	or which a corporation
ARTICLE IV SHARI The number of shares of	ES 1,000 stock is:		17 MAR SALUMF A
ARTICLE V INITIA	L OFFICERS AND/OR DIRECTORS		- 8 H
Name and Title	Bonnie E. Wood - Director	Name and Title:	
Address	22552 Esplanada Circle W	Address:	<u> </u>
	Boca Raton, FL 33433		55 66
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	

Name	and Title:	Name and Title:
Addre	ess	Address:
ARTICLE VI	REGISTERED AGENT	
	Florida street address (P.O. Box NOT accept	able) of the registered agent is:
Name:	Bonnie E. Wood	
Address:	22552 Esplanada Circle W	TALE
	Boca Raton, FL 33433	TAR TAR
<u>ARTICLE VII</u>	INCORPORATOR	₩ 8
The name and	address of the Incorporator is:	
Name:	Bonnie E. Wood	<u>ූ</u>
Address:	22552 Esplanada Circle W	
	Boca Raton, FL 33433	
Effective date,	EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and	. (OPTIONAL) cannot be more than five days prior or 90 days after the
Note: If the dathe document's	te inserted in this block does not meet the apple effective date on the Department of State's re-	icable statutory filing requirements, this date will not be listed as cords.
		process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
2	mullon	2/23/17
	Required Signature/Registered Age	Date
I submit this do	ocument and affirm that the facts stated here. Department of State constitutes a third degre	in are true. I am aware that the false information submitted in a e felony as provided for in s.817.155, F.S.
The state of the s	me Wint	2/23/17
Requ	uired Signature/Incorporator	Date

!<u>;-c</u>