## P17000038222

(Requestor's Name)				
(Address)				
` ,				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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17 APR 27 PH 12: 34
SECRLIARY OF STATE
ANALYSET FLORIDA

2 04/28/17

## **COVER LETTER**

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

SUBJECT: \(\frac{1}{2}\)	pace Refined.	T )) ( . ATE NAME – <u>MUST INCL</u>	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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
		ADDITIONAL CC	DET REQUIRED
FROM:	Lauren Bensi	(Printed or typed)	
	3895 NW 5	8th Street Address	
	Boca Raton City	FL 33496 , State & Zip	
delinaren	914 - 980 Daytime	- 9 669 Telephone number	
<del></del>	la Vren, bense E-mail address: (to be use	on 180 amail.	COM 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 corporation shall be: SPAC	EREFINED, INC.
ARTICLE II PRINCIPAL OFFICE Principal street address 3895 NW 50th Street	Mailing address, if different is:
BOCA RATON, FL 3349	<u> </u>
ARTICLE III PURPOSE The purpose for which the corporation is organize  SCYVICES	ed is: Organizing and home design
	E PR
ARTICLE IV SHARES	FLORIDA
	DIRECTORS  DIN - President Name and Title:  Address:
	Name and Title:  Address:
	Name and Title:Address:

Name a	nd Title:	Name and Title:			
Addres	s	Address:			
		<del></del>			
	REGISTERED AGENT [lorida street address (P.O. Box NOT acceptable) of	the registered agent is:			
Name:	Lauren Bensun				
Address:	3895 NW 58th Street				
	Boca Raton, FL 33496	-	17 A St G  SALLA		
ARTICLE VII	<u>INCORPORATOR</u>		APR 27		
The <u>name and a</u>	ddress of the Incorporator is:				
Name:	Lauren Benson		EU PM I2: 34 . ut state ee florio		
Address:	3895 NW 58th Street	et	34 810A		
	Bora Raton, FL 3349	6	_		
ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:					
	med as registered agent to accept service of process am familiar with and accept the appointment as reg				
,	Required Signature/Registered Agent	<del>-7</del>	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.					
Laulen	1 Benjan	4/1	2/2017		
· Kequ	ired Signature/Incorporator	/	' Date		