

11/06/2017

FAX 215 977 9386

M BURR KEIM

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**P17000089376**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : M. BURR KEIM COMPANY  
Account Number : I19990000242  
Phone : (215) 563-8113  
Fax Number : (215) 977-9386

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

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
TED TURITZ, INC.**

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11/6/2017

## ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: TED TURITZ, INC.ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

5777 GEMSTONE COURT, APT. 205, BUILDING #17BOYNTON BEACH, FL 33437ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Manufacturing representative servicesARTICLE IV SHARESThe number of shares of stock is: 200 NO PAR VALUEARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: IRWIN TURITZ, Pres. & Secy.

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

Address

5777 GEMSTONE CT.

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

APT. 205, BUILDING #17BOYNTON BEACH, FL 33437

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

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

Address

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

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

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

Address

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

17 NOV -6 PM 3:11  
CLERK OF SUPERIOR COURT  
DADE COUNTY, FLORIDA

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: IRWIN TURITZ

Address: 5777 GEMSTONE CT., APT. 205, BLDG #17  
BOYNTON BEACH, FL 33437

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: LAWRENCE BROWN

Address: 180 PHILLIPS HILL RD., STE. 3A  
NEW CITY, NY 10956

**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 days prior or 90 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 Irwin T. Turitz  
Required Signature/Registered Agent

11-1-17  
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.*

[Signature]  
Required Signature/Incorporator

11-1-17  
Date