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

****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
SATURN RENTALS, INC.**

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

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Corporate Filing Menu

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N CULLIGAN

NOV 8 2017

17 NOV -7 PM 12:39
STATE OF FLORIDA
TALLAHASSEE

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

17 NOV -7 PM 12:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME SATURN RENTALS, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

504 Saturn Lane

504 Saturn Lane

JUNO BEACH, FL. 33408

JUNO BEACH, FL. 33408

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

To transact any and all lawful activity for which a corporation may be formed.

ARTICLE IV SHARES 1,000
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicole Tergis - Director

Name and Title:

Address 504 Saturn Lane

Address:

JUNO BEACH, FL. 33408

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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: Nicole Tergis
Address: 504 Saturn Lane
JUNO BEACH, FL 33408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nicole Tergis
Address: 504 Saturn Lane
JUNO BEACH, FL 33408

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.

<u>Nicole Tergis</u>	11/07/2017
Required Signature/Registered Agent	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.

<u>Nicole Tergis</u>	11/07/2017
Required Signature/Incorporator	Date

17 NOV -7 PM 12:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA