

P19 000 014 020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

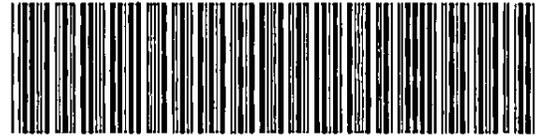
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/11/19--01019--003 **70.00

FILED
19 FEB 11 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D O'KEEFE
FEB 19 2019

H.J. Jenzano Jr. And Company

4640 N Federal Hwy
Lighthouse Point, FL 33064
Office: (954)781-8808

January 22,2019

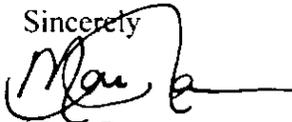
Department of State
New Filing Section
Div of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Ref : New Filing, Antaris Business Services Inc.

Dear Representative;

Please be advised that, the newly Incorporated Entity will not revoke the Administrative Dissolution filed September 22, 2017.

Sincerely

A handwritten signature in black ink, appearing to read "Mark Ramos", with a long horizontal flourish extending to the right.

Mark Ramos
President
Antaris Business Services Inc.

COVER LETTER

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

SUBJECT: Antaris Business Services Inc

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Harry J Jenzano

Name (Printed or typed)

4640 N Federal Hwy

Address

Lighthouse Point, Fl. 33064

City, State & Zip

954-781-8808

Daytime Telephone number

Hjenzano@comcast.net

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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: Harry J Jenzano
 Address: 4640 N Federal Hwy
Lighthouse Point, Fl. 33064

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Mark Ramos
 Address: 212 NE 22nd Ave
Pompano Beach Fl 33062

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 19 FEB 11 AM 10:03
 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

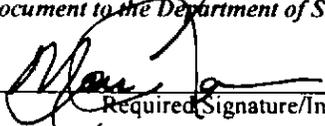
Effective date, if other than the date of filing: 02/01/2019 (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 Required Signature/Registered Agent 1/22/19
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.


 Required Signature/Incorporator 2/4/19
Date