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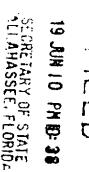
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COVER LETTER

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

SUBJECT: BA	RRY (DLIVER SEPLOW INC				
SOBJECT.		(PROPOSED CORPOR	ATE NAME – <u>MUST INCLU</u>	JDE SUFFIX)		
Enclosed are an	origii	nal and one (1) copy of the ar	ticles of incorporation and	a check for:	¬	
☐ \$70.0 Filing Fe		S78.75 Filing Fee & Certificate of Status	& Certified Copy	Filing Fee, Certified Copy & Certificate of Status		
			ADDITIONAL CO	PY REQUIRED		
FROM:	BAR	RY MANKO				
FROM		Nam	e (Printed or typed)			
	2373	NW 49TH LANE				
			Address			
	BOC	A RATON, FL 33431		ر نعر:	ta	
		City	, State & Zip		19 J	
	561-3	391-1411		HAS	TO JUN 10 PM	•
		Daytime	Telephone number			
	BAR	RY.MANKO@GMAIL.COM		otification)		•
		E-mail address: (to be use	ed for future annual report n	otification)	₽ □	

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)

TICLE II PRIN	CIPAL OFFICE		
	Principal street address	Mailing ac	láress, if different 15:
73 NW 49TH LAN	E		
CA RATON, FL 3	33431		
TICLE III PURI	PROFIT the corporation is organized is:	T, SALE OF WATCHES	
			
			-
TICLE IV SHA	RES 106 (ONE HUNDRED)		
RTICLE IV SHA	<u>RES</u> 100 (ONE HUNDRED) of stock is.		
RTICLE IV SHA te number of shares	<u>RES</u> 106 (ONE HUNDRED) of stock is.	·	
e number of shares	<u>RES</u> 106 (ONE HUNDRED) of stock is		
e number of shares RTICLE V INIT	of stock is	2	
e number of shares RTICLE V INIT Name and T	of stock is. TIAL OFFICERS AND/OR DIRECTOR. INC. BARRY MANKO — PENUL	2	
e number of shares RTICLE V INIT	of stock is. TIAL OFFICERS AND/OR DIRECTOR. INC. BARRY MANKO — PENUL	S Name and Title:	
e number of shares RTICLE V INIT Name and T	of stock is. FIAL OFFICERS AND/OR DIRECTOR! BARRY MANKO — POSIDE 2373 NW 49TH LANE	S Name and Title:	
e number of shares RTICLE V INIT Name and T Address	of stock is. FIAL OFFICERS AND/OR DIRECTOR. BARRY MANKO — PENUL 2572 NW 49TH LANE BOCA RATON, FL 33431	Name and Title:Address:	
Name and Ti	of stock is. FIAL OFFICERS AND/OR DIRECTOR! BARRY MANKO — PESIDE 2373 NW 49TH LANE BOCA RATON, FL 33431	Name and Title: Address: Name and Title:	
e number of shares RTICLE V INIT Name and T Address	of stock is. FIAL OFFICERS AND/OR DIRECTOR. BARRY MANKO — PENUL 2572 NW 49TH LANE BOCA RATON, FL 33431	Name and Title: Address: Name and Title:	
Name and Ti	of stock is. FIAL OFFICERS AND/OR DIRECTOR! BARRY MANKO — PESIDE 2373 NW 49TH LANE BOCA RATON, FL 33431	Name and Title: Address: Name and Title:	
Name and Ti	of stock is. FIAL OFFICERS AND/OR DIRECTOR! BARRY MANKO — PESIDE 2373 NW 49TH LANE BOCA RATON, FL 33431	Name and Title: Address: Name and Title: Address:	SECR SILLA
Name and Ti Address	of stock is. FIAL OFFICERS AND/OR DIRECTOR: BARRY MANKO — PENUL 2573 NW 49TH LANE BOCA RATON, FL 33431	Name and Title:	SECRETARY OF
Name and Ti Address	of stock is. FIAL OFFICERS AND/OR DIRECTOR! BARRY MANKO — PESIDE 2373 NW 49TH LANE BOCA RATON, FL 33431	Name and Title: Address: Name and Title: Address: Name and Title:	SECRETARY OF

•	. ,	
Name an	d Title:	Name and Title:
Address		Address:
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable	of the registered agent is:
Name:	BARRY MANKO	to the registered agent is.
Address:	2373 NW 49TH LANE	_
Address.	BOCA RATON, FL 33431	
		_
ARTICLE VII	<u>INCORPORATOR</u>	
The name and ac	ddress of the Incorporator is:	
Name:	BARRY MANKO	
Address:	2373 NW 49TH LANE	
	BOCA RATON, FL 33431	
		_
ARTICLE VIII	other than the date of filing:05-01-2019	(OPTIONAL)
(If an effective d	late is listed, the date must be specific and can	not be more than five days prior or 90 days after the
filing.)		
	inserted in this block does not meet the applical fective date on the Department of State's record	ole statutory filing requirements, this date will not be listed as
Having been num this certificate) I	ned as registered agent to agcept service of proc am familiar with and accept the appointment as	ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
1.1-5/	wii Mak	6/3/19
	Required Signature/Registered Agent	Date
I submit this doc	cument and affirm that the facts stated herein a	ire true. I am aware that the false information submitted in a
document to the	Department of Sidte constitutes a third degree fe	lony as provided for in s.817.155, F.S.
1/6	ired Signature/Incorporator	
- Requi	irea organitare/fricorporator	

Name and 1	Title.	Name and Title	
Address		Address.	
		_	
	EGISTERED AGENT		
	ida street address (P.O. Box NOT acceptable) of BARRY MANKO	the registered agent	IX:
•	2373 NW 49TH LANE		
	BOCA RATON, FL 33431		
ARTICLE VII IN	CONDON ATON		
	ress of the incorporator is. BARRY MANKO		
Name: Address:	2373 NW 49TH LANE		
Address.	BOCA RATON, FL 33431		
Effective date, if of	EFFECTIVE DATE: 05-01-2019 her than the date of filing: e is listed, the date must be specific and cannot	. (OPT	TONAL) days prior or 90 days after the
Note: If the date in	iscreed in this block does not meet the applicable sective date on the Department of State's records.	statutory filing requ	irements, this date will not be listed as
Having been name this certificate) I an	d as registered agent to ageept service of process i familiar with and accept the appointment as reg	for the above state istered agent and a	d corporation at the place designated in gree to act in this capacity
- Fred	Rig Maky		6/3/19
	Required Signature/Regristered Agent		Date /
I submit this docur document to the De	nent and affirm that the flicts stated herein are to partment of Stay constitutes a third degree felon	true. I am aware the as provided for in	nat the faise information submitted in a s.817.155, F.S.
VI (6)	2 TACC		(6/3/19
Kequire	d Signature/Incorporator		Date

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