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Florida Department of State  
Division of Corporations  
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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 : (718) 889-7420

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

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

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FLORIDA PROFIT/NON PROFIT CORPORATION  
CAS NATIONAL CORP.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

Dec 27, 2019

**ARTICLES OF INCORPORATION**

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



**ARTICLE I NAME** CAS NATIONAL CORP.

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

110 CRANES ROOST

ROYAL PALM BEACH, FL 33411

Mailing address, if different is:

110 CRANES ROOST

ROYAL PALM BEACH, FL 33411

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_ to engage in any lawful act or activity for

which corporations may be organized.

**ARTICLE IV SHARES** 200

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: CAREY ANTHONY SEDLEY SALMON Name and Title: \_\_\_\_\_

Address 110 CRANES ROOST *Pres* Address: \_\_\_\_\_

ROYAL PALM BEACH, FL 33411

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

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

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

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

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TALLAHASSEE FL

FILED

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: CAREY ANTHONY SEDLEY SALMON  
 Address: 110 CRANES ROOST  
ROYAL PALM BEACH, FL 33411

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CAREY ANTHONY SEDLEY SALMON  
 Address: 110 CRANES ROOST  
ROYAL PALM BEACH, FL 33411

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**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 business days prior or 90 business 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

12/24/19  
 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

12/24/19  
 Date