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Florida Department of State
Division of Corporations
Electronic Filing System

((H20000008362 3)))



H200000083623ABCV

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.

0-
Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION**Rofin Management Inc.**

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

RECEIVED

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OFFICIAL
EXPERIENCE

SECRETARY OF STATE
TALLAHASSEE, FL

2020 JAN -8 PM 12:14

100

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

1/8/2020

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

ARTICLE I NAME

The name of the corporation shall be: Rofin Management Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1840 Main Street Ste 204

Weston, FL 33326

Mailing address, if different is:

1840 Main Street Ste 204

Weston, FL 33326

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

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Edward Ross-President

Address: 1840 Main Street Ste 204

Weston, FL 33326

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: Edward Ross
 Address: 1840 Main Street Ste 204
 Weston, FL 33326

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Edward Ross
 Address: 1840 Main Street Ste 204
 Weston, FL 33326

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 five 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:

(X) [Signature]
 Required Signature/Registered Agent

1/2/20
 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

1/2/20
 Date

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 TALLAHASSEE, FL

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