## P200 00010254

N. Barattini				
(Requestor's Name)  1. P. Bry 650039  (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:				





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

ARTICLE 1 NAME The name of the corporation shall be:	INC.	
The name of the corporation shall be:		
ARTICLE II PRINCIPAL OFFICE Principal street address 3331 Street Road, Ste 110		ss, if different is:
Bensalem PA 19020		
	zed is:	<u> </u>
		<u>-</u>
ARTICLE IV SHARES The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR		
Name and Title:	Name and Title:	
Address	Address:	
		<u>:                                    </u>
<del></del>		. 💍
		<u> </u>
Name and Title	Name and Title:	, 4
	Name and Title:	: <u> </u>
Address	Address:	<u> </u>
Name and Title:	Name and Title:	
Address	Address:	

Name and Title:		Name and Title:	
Addres	s	Address:	
	Decoration and Account		
	<u>REGISTERED AGENT</u> lorida street address (P.O. Box NOT accepts	able) of the registered agent is:	
Name:	CORPORATE ACCESS, INC.	or and regional agent is.	
Address:	236 East 6th Avenue		
Ta	Tallahassee, FL 32303		
ARTICLE VII	<u>INCORPORATOR</u>	. 20	
The name and a	ddress of the Incorporator is:		
Name:	Joseph J. Collopy		
Address:	3331 Street Road, Suite 110		
	Bensalem, PA 19020-2045		
Effective date, if	EFFECTIVE DATE: Other than the date of filing:	(OPTIONAL) cannot be more than five days prior or 90 days after the	
filing.)	ance is tisteen, the date must be specific and	cannot be more than the tarya prior of 50 onlys after the	
	inserted in this block does not meet the appliffective date on the Department of State's rec	icable statutory filing requirements, this date will not be listed as cords.	
this certificate, I		process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity	
L/ox	Kirsi.	2-6-20	
	Required Signature/Registered Age	nt Date	
I submit this doc document to the	cument and uffirm that the facts stated here Department of State constitutes a third degre	in ure true. I am aware that the false information submitted in a e felony as provided for in s.817.155, F.S.	
	of allow	02/06/2020	
Requi	ired Signature/Incorporator	Date	