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To:

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From:

Account Name : HUBCO

APR 2 9 2020

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FLORIDA PROFIT/NON PROFIT CORPORATION SW RETAIL ADVISORS INC

Certificate of Status	1
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T. SCOTT

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

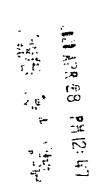
The name of the corporation shall be:

SW RETAIL ADVISORS INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1800 S OCEAN BLVD #1508 POMPANO BEACH, FL 33062



ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

STACEY WIDLITZ 1800 S OCEAN BLVD #1508 POMPANO BEACH, FL 33062

1-516-681-1040

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

STACEY WIDLITZ - PRESIDENT/ DIRECTOR 1800 S OCEAN BLVD #1508 POMPANO BEACH, FL 33062

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

STACEY WIDLITZ 1800 S OCEAN BLVD #1508 , POMPANO BEACH, FL 33062

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27th day of April 20 20

STACEY WIDLITZ

Signature

15168822966

1. The name of the corporation is: **SW RETAIL ADVISORS INC**

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

	Name
<u>_1</u>	Name
<u>_1</u>	
	800 S OCEAN BLVD #1508
	(P.O. Box or Mail Drop Box NOT Acceptable)
<u>_</u> F	POMPANO BEACH, FL 33062
	(City / State / Zip)
obligations of my position as registered	formance of my duties, and am familiar with and accept the agent.
St. W.M.	04/27/2020