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| | | |
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| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Bu | siness Entity Nam | e) |
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| (Do | cument Number) | |
| | | |
| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327

Tallahassee, FL 32314

| SUBJECT: | Bandit Leasing, Inc. | | | |
|-------------------------|--|---------------------------------------|--|----|
| 30BJEC1 | (PROPOSED CORPORA | ATÉ NAME - <u>MÚST INCL</u> | UDE SUFFIX) | _ |
| | | | | |
| Enclosed are an ori | iginal and one (1) copy of the ar | ticles of incorporation and | d a check for: | |
| □ \$70.00 Filing Fee | ☑ \$78.75 Filing Fee & Certificate of Status | □ \$78.75 Filing Fee & Certified Copy | ☐ \$87.50 Filing Fee. Certified Copy & Certificate of Status | |
| | | ADDITIONAL CO | | |
| | | | | |
| FROM: | Kathleen Diedrich | e (Printed or typed) | 2020 | |
| | 1250 Barclay Blvd | | 2020 HAY 12 SAID AHASEE | 7 |
| | | Address | <u> </u> | 1 |
| | Buffalo Grove, IL 60089 | | PH 12: | :- |
| | City | . State & Zip | 23 | |
| | 877-894-0073 | | ω | |
| | Daytime 1 | Felephone number | | |
| | knovo@wescon.construc | tion | | |
| | E-mail address: (to be use | ed for future annual report i | notification) | |

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)

| ARTICLE 1 NAME The name of the corporat | ion shall be: Bandit Leasing. In | c. | |
|---|---|------------------------|-----------------------------------|
| ARTICLE II PRINC | IPAL OFFICE Principal <u>street</u> address | | Mailing address, if different is: |
| 305 North Dr., Suite C | | _ | |
| Melbourne, FL 32934 | | | |
| ARTICLE III PURPO The purpose for which the | <u>OSE</u> ne corporation is organized is: _ | to act as an equipment | MAY 12 |
| | | | PM 12: 23 |
| | Stock is: LOFFICERS AND/OR DIRECT | | rials. Sergio Novo. Director |
| Name and Title | 305 North Dr., Suite C | Name and ` | 305 North Dr., Suite C |
| Address | Melbourne, FL 32934 | Address: | Melbourne, FL 32934 |
| Name and Title: | | Name and Address: | Title: |
| Name and Title: | | Name and 1 | Fitle: |
| | | | |

| Name and Ti | tle: | Name and Title: | |
|---|--|--|---------------------------|
| Address | | Address: | |
| | | | |
| | - | | |
| ARTICLE VI REC | GISTERED AGENT la street address (P.O. Box NOT acc | eptable) of the registered agent is: | |
| | Kristen Novo | | |
| Address: | 05 North Dr., Suite C | | |
| | Melbourne, FL 32934 | | |
| | | | |
| ARTICLE VII INC | CORPORATOR | | |
| The name and addre | ss of the Incorporator is: | | |
| Name: | Kristen Novo | | |
| Address: | 305 North Dr., Suite C | | |
| | Melbourne, FL 32934 | | |
| <u>ARTICLE VIII EF</u> | FECTIVE DATE: | | |
| Effective date, if other | er than the date of filing: | (OPTIONAl | |
| filing.) | is fisted, the date must be specific : | and cannot be more than live days | prior or 90 days att |
| | erted in this block does not meet the tive date on the Department of State | applicable statutory filing requirements records. | nts, this date will not l |
| | | f process for the above stated corpora | |
| cerujicaie, i am jami | uar wiin ana accept the appointment | as registered agent and agree to act in | n inis capacity 1 |
| 7.1 | Required Signature/Registered A | Amant | <u> </u> |
| Lembrait this dossess | | | falsa information and |
| | | nerein are true. I am aware that the gree felony as provided for in s.817.1 | |
| \sim \sim \sim \sim \sim \sim \sim \sim | 01.4 | | aclast |
| 1 11 1 | 4113 | | |

EXHIBIT A

This corporation authorizes 1,000 total common stock shares, further described as follow:

- 100 shares shall be voting common stock shares which shall have exclusive voting rights
- 900 shares shall be non-voting common stock shares which shall have no voting rights except as otherwise provided by law

FILING WITH SECRETARY OF STATE

Please Return All Correspondence Concerning This Matter To:

KATHLEEN DIEDRICH

TAVAS IMPLEMENTATION SERVICES, LLC

1250 BARCLAY BLVD.

BUFFALO GROVE, IL 60089

(877) 894-0073

kathleen.diedrich@tavasllc.com