

FLORIDA PROFIT/NON PROFIT CORPORATION

FILAT, INC.

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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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SUBJECT:	FILAT INC,	
•••	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)	

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

区 \$70.00 Filing Fee

 I \$78.75
 c Filing Fee
 & Certificate of Status

□ \$78.75
 □ \$87.50
 Piling Fee
 Piling Fee
 Filing Fee,
 & Certified Copy
 & Certificate of Status
 ADDITIONAL COPY REQUIRED

FROM: FILAT, INC.

Name (Printed or typed)

1475 SILK OAK DRIVE

HOLLYWOOD, FL 33021 City, State & Zip

<u>(310)490-5534</u> Daytime

Daytime Telephone number

VASILEFILAT25@GMAIL.COM E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

LETI PRINCIPA		· · · · · · · · ·	- 14 (16 1
Prir	ncipal street address	-	s, if different is:
147 <u>5 SILK OAK D</u>		1475 SILK O	AK DRIVE
IO <u>LLYWOOD, F</u> L	. 33 <u>021</u>	HOLLYWOOE), FL 33021
<u>LE III PURPOSE</u> pose for which the c	orporation is organized is: <u>ANY</u>	AND ALL LAWFUL BUSINES	<u>s</u>
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Add	ress	Address:	
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The <u>name an</u>	<u>REGISTERED AGENT</u> <u>J Florida street address</u> (P.O. Box NOT acceptable) o	of the registered agent is:	
Name [*]	FILAT, VASILE	_	
Address:	1475 SILK OAK DRIVE		
	HOLLYWOOD, FL 33021		
	II_INCORPORATOR		
The <u>name ar</u>	d address of the incorporator is:		
Name.	FILAT, VASILE	_	

Address:

HOLLYWOOD, FL 33021

1475 SILK OAK DRIVE

ARTICLE VIII _ EFFECTIVE DATE:

_. (OPTIONAL)

Effective date, if other than the date of tiling: . .____ (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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 abave stated corporation at the place designated in this certificate, I um familiar with and accept the appointment as registered agent and agree to act in this capacity

Vasile Filat	08/14/2020
 Required Signature/Registered Agent	Date

I submit this document and affirm that the facts stated herein are true. I am aware that the fatse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.317.155, F.S.

Vasile Filat

08/14/2020

Required Signature/Incosporator

Date