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(Re	questor's Name)	<del> </del>
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PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243 (OFFICE USE ONLY) Business Name & Document Number, (if known): 1. F3TISH & CO Inc. Document Number (if known) Name Will wait <u>x</u> Walk in Certified Copy Certificate of Status **NEW FILINGS AMENDMENTS** \_\_\_ Amendment \_\_\_\_ Profit \_\_\_\_Resignation of R.A. Officer/Director \_\_\_\_ Not for Profit \_\_\_ Limited Liability \_\_\_\_Change of Registered Agent \_\_\_\_Domestication Dissolution/Withdrawal X INC Conversion Merger OTHER REGISTRATION/OUALIFICATIONS **OTHER FILINGS** Foreign Annual Report

FLORIDA CAPITAL COURIER SERVICES, INC

Fictitious Name

APOSTIL

\_ Statement of Authority

**COUNTRY** 

EXAMINER'S INITIALS:

\_\_\_Limited Partnership Reinstatement

Trademark

Other

## **COVER LETTER**

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

SUBJECT:	F3TISH & CO Inc. (PROPOSED CORPOR.	ATE NAME - <u>MUST INCL</u>	(DE SUFFIX)
Enclosed are an or	ginal and one (1) copy of the ar	ticles of incorporation and	a check for:
	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee. Certified Copy & Certificate of Status PY REQUIRED
FROM: _	Morty Etgar PA	e (Printed or typed)	

3363 SUNNY ISLES BLVD. SUITE 801

NORTH MIAMI BEACH, FL 33160

305-577-0454

Frontdesk@etgarcpa.com

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

Address

City. State & Zip

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

ARTICLE I NAS. The name of the corpo	F3TISH & CO Inc.		
ARTICLE II PRI		•	ddress, if different is:
3363 SUNNY ISL	ES BLVD_SUITE 801		
NORTH MIAMI E	BEACH, FL 33160		
ARTICLE III PUR The purpose for whice	POSE h the corporation is organized is:		
			)201
<u>ARTICLE IV</u> SHA The number of shares	IRES of stock is: 1.000		P 4
ARTICLE V INT	TAL OFFICERS AND/OR DIRECTORS		· · · · · · · · · · · · · · · · · · ·
Name and T	itle: HILA ZIGDON / PRESIDENT	Name and Title:	
Address	3363 SUNNY ISLES BLVD. SUITE 801	Address.	
	NORTH MIAMI BEACH, FL 33160		
Name and Ti	ile:	Name and Title:	
Address		Address:	
Name and Ti	tle:	Name and Title:	
Address		Address:	

Name and	! Title:	Name and Title:
Address		Address:
		<del>-</del>
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) o	f the registered agent is:
Name:	Morty Etgar PA	
Address:	3363 SUNNY ISLES BLVD. SUITE 801	-
Addiess.	NORTH MIAMI BEACH. FL 33160	-
ARTICLE VII	NCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	Morty Etgar PA	_
Address:	3363 SUNNY ISLES BLVD STE 801	_
	NORTH MIAMI BEACH, FL 33160	_
ARTICLE VIII	<i>EFFECTIVE DATE:</i> 12/2/2020	20772344
Effective date, if (If an effective d: filing.)	other than the date of filing:	. (OPTIONAL) of be more than five days prior or 90 days after th
	inserted in this block does not meet the applicable Tective date on the Department of State's records.	stannory filing requirements, this date will not be li-
	ed as registered agent to accept service of process f miliar with and accept the appointment as register	or the above stated corporation at the place designated red agent and agree to act in this capacity
Morty Etax	er fl	12/2/2020
Morty Egar Pll  Required Signature Registered Agent		Date

Morty Etgar fll Required Signature Incorporator 12/2/2020

Date