# P21000003191

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(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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#### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

## incservo

#### **ORDER FORM**

**TO** Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST DATE 1/8/2021

**PRIORITY** Routine

OUR REF\_#\_(Order\_ID#)] 881801

ORDER ENTITY
HAROLD SPATZ INC.

P	HAROLD SPATZ INC. (FL)	_
	File the attached articles of domestication and subsquent articles of incorporation.	

NOTES:		

\$128.75 Authorized

Email address for annual report reminders: erin@servico.com

#### RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, January 19, 2021 Page 1 of 1



2031 JAH 19 PH 12: 35

### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 15, 2021

**INCSERV** 

SUBJECT: HAROLD SPATZ LTD. INC.

Ref. Number: W21000004427



We have received your document for HAROLD SPATZ LTD. INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "LTD.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

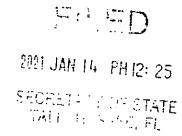
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

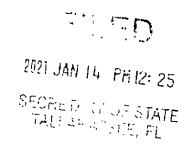
Letter Number: 921A00000993

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# Articles of Domestication Foreign Corporation Domesticating to Florida

The undersigned, Elizabeth Kaufman	President		
(Name)	(Title)		
of HAROLD SPATZ LTD.	a foreign		
corporation, in accordance with s. 607.11922	2, Florida Statutes, submit these Articles of		
Domestication.			
1. Then name of the domesticating corp	poration is HAROLD SPATZ LTD.		
	(Foreign Corporation)		
	<del></del>		
The livindiation and date of the format	tlon is New York - January 8, 1972		
3. The name of the domesticated corporate	The name of the domesticated corporation is HAROLD SPATZ INC.		
4. The jurisdiction of formation of the de	. The jurisdiction of formation of the domesticated corporation is Florida		
•			
5. The domestication corporation is a fo	nestication corporation is a foreign corporation and the domestication was		
approved in accordance with its orga	nic law.		
6. Attached are Florida Articles of Incorp	noration to complete the domestication		
requirements pursuant to s.607.0202			
I certify I am authorized to sign these Articles	s of Domestication on behalf of the corporation.		
<b>1</b>			
•	(Authorized Signature)		



# ARTICLES OF INCORPORATION IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I	NAME	
THE NAME OF TH	E CORPORATION SHALL	L BE:
HAROLD SPAT	z INC.	
ARTICLE II	PRINCIPAL OF	FICE
THE PRINCIPAL P	LACE OF BUSINESS/MA	ALLING ADDRESS IS:
	pipal Address	Mailing Address
7918 Harbor Island C	r., Apl. 310	7918 Harbor Island Dr., Apt. 310
North Bay Village, F	-L 33141	North Bay Village, Ft. 93141
ARTICLE III	PURPOSE	
THE PURPOSE P	OR WHICH THE CORPO	RATION IS ORGANIZED:
Any and all lawful b	usiness.	
	·····	
ARTICLE IV	SHARES	
THE NUMBER OF	SHARES OF STOCK IS:	200 no per value
ARTICLE VI	REGISTERI	ED AGENT AND STREET ADDRESS
THE NAME AND	FLORIDA STREET ADI	DRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:
Elizabeth Kaufmen		. <del>.</del>
7918 Harbor Island	Dr., Apt 310	
North Bay Villago, I	FL 33141	·····
	_	TO A CORDER DESIGNATION OF PROCESS FOR THE
HAVING BEEN	NAMED AS REGISTER	ED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE HE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR
ABOVE STATED	CORPORATION AT TH	IT AS REGISTERED AGENT AND AGREE TO ACT IN THIS
CAPACITY.	SPI THE APPOINTMEN	
CATHELLI		V 11/18/2020
		- I THILDE
Signature/Regi	stered Agent	Date

#### ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND	ADDRESS(ES) AND SPECIFIC TITLES	5 <b>:</b>		
Name & Title:	Elizabeth Kaufman, President	Name & Title:		
Address:	7918 Herbor Island Dr., Apt. 310			
	North Bay VIllage, NY 33141			
Name & Title: Address:		Name & Title: Address:		AH II PH
Name & Title:				
Name & Title:		Name & Title:		
I submit this doc information subm provided for in s	ument and affirm that the facts at a nitted in a document to the Depure	ted herein are true. I a ment of State constitut	am aware that false tee a third degree felo	ny as
4			11/18/	2020
Signature/Autho	prized Person	<del></del>	Date	