P210000 22906

(Requestor's Name)
(Address)
(Address)
(1001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000361896290

93/15/21--01037--006 **70.00

2021 MAR 15 FH to 21





Department of State

Division of Corporations

Date: 03/15/2021

American Expediting (Stealth Courier)

1531 Commonwealth Business Dr.

Ste 105

Tallahassee, Fl. 32303

850-294-5632

Stealth Courier Box Amendment

Company: Solulite Corp.

Requester: Compass Global Corp

13035973

COVER LETTER

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

SUBJECT: Se	OLULITE CORP		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the artic	cles of incorporation and	l a check for:
ૹ \$70.00 Filing Fe	D □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of
		Status ADDITIONAL COPY REQUI	
			· · ·
FROM:	COMPASS GLOBAL CORP		
	Name	(Printed or typed)	
	21218 SAINT ANDREWS BI	LVD. #304.	
	BOCA RATON FL 33433		
	City,	State & Zip	
	561 388 0375		
	Daytime To	elephone number	
	OPERATIONS@COMPASSGLOB	ALCORP.COM	
-	E-mail address: (to be used	for future annual report r	otification)

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 I NAME The name of the corporation shall be: SOLULITE CORP		
Principal of address 7000 W PALMETTO PARK ROAD. SUITE #210.	Mailing address, if different is: 21218 SAINT ANDREWS BLV #304.	'D
BOCA RATON FL 33433	BOCA RATON FL 33433	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
INTL CONSULTING, LOGISTICS & PROCURES & SUPPLIES FOR IT & TE		RVICE
	202	
	HAA	.1
	<u> </u>	``
The number of shares of stock is: 100,000		16*
NATICLE V INITIAL OFFICERS AND/OR DIRECTORS MARTINEZ, JUAN C / Name and Title: PRESIDENT	ည်	
Address 21218 SAINT ANDREWS BLVI		
#304.		
BOCA RATON FL 33433		
Name and Title:	Name and Title:	
Address	Address:	.
		
Name and Title:	Name and Title:	
Address	Address:	
		

Name and Titl	e:	Name and Title:			
Address		Address:			
					
ARTICLE VI REGI					
	street address (P.O. Box NOT acceptable) of D MORA	the registered agent is:			
	1218 SAINT ANDREWS BLVD.	#304.			
B	OCA RATON FL 33433	-			
ARTICLE VII INCO)RPORATOR				
The <u>name and address</u>					
Name: _	MARC RAFFE				
Address:	21218 SAINT ANDREWS BLVD	. #304.			
	BOCA RATON FL 33433				
ARTICLE VIII EFF Effective date, if other (If an effective date is filing.)	ECTIVE DATE: than the date of filing: listed, the date must be specific and cannot	(OPT!ONAL) t be more than five days prio	r or 90 day	s after	the
Note: If the date inser	ted in this block does not meet the applicable we date on the Department of State's records.	statutory filing requirements, t	his date wil	l not be	listed as
	registered agent to accept service of process fo or with and accept the appointment as registere			designa	ited in this
ill	A		MARCH	14,	2021
00	Required Signature/Registered Agent	· · ·		Date	
	t and affirm that the facts stated herein are t tment of State constitutes a third degree felony			n subn	nitted in a
	2		MARCH	14.2	2021
Required Signature/Inc	corporator	Date		-,-	