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(Requestor's Name)

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(City/State/Zip/Phone #)

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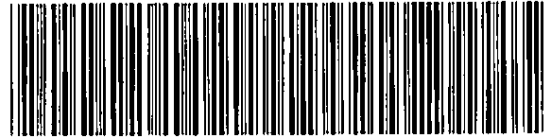
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/23/21--01014--009 **70.00

2021 MAR 23 AM 9:58

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2021 MAR 23 PM 12:08

COVER LETTER

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

SUBJECT: LOGEV IMMOBILIER, INC.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

FROM: SERFATY LAW, P.A.
Name (Printed or typed)

4770 BISCAYNE BOULEVARD, STE 1430
Address

MIAMI, FL 33137
City, State & Zip

(305) 722-8555
Daytime Telephone number

CSERFATY@SERFATYLAW.COM
E-mail address: (to be used for future annual report 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 I NAME

The name of the corporation shall be: LOGEV IMMOBILIER, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4770 BISCAYNE BOULEVARD STE 1430

MIAMI, FL 33137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES OF STOCK / \$1 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: VALERY ELHADAD - PSTD

Name and Title: _____

Address 4770 BISCAYNE BOULEVARD STE 1430

Address: _____

MIAMI, FL 33137

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2021 MAR 23 AM 9:58

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Serfaty Law, P.A.

Address: 4770 BISCAYNE BOULEVARD, STE 1430

MIAMI, FL 33137

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Serfaty Law, P.A.

Address: 4770 BISCAYNE BOULEVARD STE 1430

MIAMI, FL 33137

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(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 above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:

Charles Serfaty
Required Signature/Registered Agent

03/22/2021
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Charles Serfaty
Required Signature/Incorporator

03/22/2021
Date