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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	·
☐ P CK-U-	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instruction	s to Filing Officer	
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COVER LETTER

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

SUBJECT: U	UNIVERSAL TENDERS, INC				
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFE					
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	I a check for:		
XJ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certified Copy & Certificate of		
		ADDITIONAL COPY REQUIRED			
FROM:	SERFATY LAW PA	e (Printed or typed)			
<u></u>	4770 BISCAYNE BLVD SUITE 1430				
	MIAMI, FL 33137	Address			
	City	, State & Zip			
	305-722.8555				
 -	Daytime Telephone number				
	SRODRIGUEZ@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)

ne of the corporation	ti a transferite		
<u>CLE II — PRINCI</u> P	rincipal street address		Mailing address, if different is:
SW 25th TERRAC	t	2700 SW	/ 25th TERRACE auderdale, Fl 33312
Lauderdale, F1 3331	2	r orth La	nigergaic, rt 55512
CLEIU DHDDAY	SE.	· 	
ICLE III PURPOS purpose for which the	corporation is organized is: FOR A	LL AND ANY LAW	FUL BUSINESS
		<u> </u>	
		-	
eten e uz - on abr	r.		
TCLE IV SHARE.	<u>\$</u> ock is:		
TCLE IV SHARE. number of shares of st	<u>\$</u> 100 ock is:		
	ock is: OFFICERS AND/OR DIRECTORS		
number of shares of st	ock is: OFFICERS AND/OR DIRECTORS		: LAURENT BENSOUSSAN- C
number of shares of st	ock is: OFFICERS AND/OR DIRECTORS		: LAURENT BENSOUSSAN- C 1940 N HIBISCUS DR
number of shares of starting o	ock is: OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director	Name and Title	
number of shares of st FICLE V INITIAL Name and Title:	OCK IS: OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503	Name and Title	1940 N HIBISCUS DR
number of shares of st FICLE V INITIAL Name and Title:	OCK IS: OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503	Name and Title	1940 N HIBISCUS DR
number of shares of starting of starting process of starting proce	OCK IS: OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503	Name and Title Address:	1940 N HIBISCUS DR NORTH MIAMI, FL 33181
number of shares of starting in the share and Title: Address	OCK IS: OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503 HALLANDALE, FL 33009	Name and Title Address: Name and Title	1940 N HIBISCUS DR NORTH MIAMI, FL 33181
Name and Title: Name and Title:	OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503 HALLANDALE, FL 33009	Name and Title Address: Name and Title	1940 N HIBISCUS DR NORTH MIAMI, FL 33181
Name and Title: Name and Title:	OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503 HALLANDALE, FL 33009	Name and Title Address: Name and Title	1940 N HIBISCUS DR NORTH MIAMI, FL 33181
Name and Title: Name and Title:	OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503 HALLANDALE, FL 33009	Name and Title Address: Name and Title	1940 N HIBISCUS DR NORTH MIAMI, FL 33181
Name and Title: Name and Title: Address Address Address	OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503 HALLANDALE, FL 33009	Name and Title Address: Name and Title Address: Address:	NORTH MIAMI, FL 33181
Name and Title: Name and Title: Address Address Address	OFFICERS AND/OR DIRECTORS BERNARD CALOT - Director 100 GOLDEN ISLES UNIT 503 HALLANDALE, FL 33009	Name and Title Address: Name and Title Address: Name and Title Name and Title	NORTH MIAMI, FL 33181

Name and	Title:	Name and Title:	
, Address		Address:	
•			
	<u>EGISTERED AGENT</u>		
The name and Flo	rida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	SERFATY LAW PA	_	
Address:	4770 BISCAYNE BLVD SUITE 1430	<u></u>	
	MIAMI, FL 33137		
<u>ARTICLE VII - L</u>	<u>NCORPORATOR</u>		
The <u>name and ado</u>	Iress of the Incorporator is:		
Name:	CHARLES S. SERFATY		
	4770 BISCAYNE BLVD		
Address:	SUITE 1430	<u> </u>	
	MIAMI, FL 33137		
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if o	ther than the date of filing: te is listed, the date must be specific and can	(OPTIONAL)	
(If an effective da filing.)	te is listed, the date must be specific and cam	not be more than five days prio	r or 90 days after the
	nserted in this block does not meet the applicab		nis date will not be listed as
the document's eff	ective date on the Department of State's record	S.	
Harrison barrer		. For the order of the second	and the control of the desired and the all the
certificate, I am fa	ed as registered affent to adoept servicefof process miliar with and docept the appointment as regist	for the above stated corporation to ered agent and agree to act in this	u the place designated in this capacity
·	fluida X. FT		
	Marky Dermit		03/25/2021
	Required Signature/Registedd/Agent		Date
I submit this docu document to the D	ment and diffirm thhi the facts kilited herein a epartment of State constitutes aphirilagueco feto	re true. I am aware that the falso ony as provided for in s.817.155, F	information submitted in a E.S.
$\mathcal{C}_{\mathcal{I}}$	LUNDA DO MET		03/25/2021
Required Signature	e/incorporator	Date	