4/28/2021

Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 Fax Number : (845)818-3588

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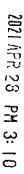
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Help



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

The name of the corpora			·	Mailing address, if different	is:	
8819 STIRLING ROAD				8819 STIRLING ROAD		
COOPER CITY, FL 3.	3328	,	COOPER	CITY, FL 33328		
ARTICLE III PURP The purpose for which	OSE any la the corporation is organized is:	wful activity			· ·	
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The number of shares o	f stock is: AL OFFICERS AND/OR DIRECTOR		e and Title	Meir Yaloz, Vice Presider	 	
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The number of shares o	f stock is:					
The number of shares o ARTICLE V INITI Name and Tit	f stock is: AL OFFICERS AND/OR DIRECTOR Gil Ribak, Vice President 838 Spinnaker Dr E	Nam		5722 SO Flamingo Road,		
The number of shares o ARTICLE V INITI Name and Tit Address	f stock is: AL OFFICERS AND/OR DIRECTOR le: 838 Spinnaker Dr E Hollywood, FL 33019	Nam Add	ress:	5722 SO Flamingo Road,		
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COOPER CITY FL 33328 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Gil Ribak	Name and Title:		Name and Title:			
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Gil Ribak Address: COOPER CITY FL 33328 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Gil Ribak Address: Gil Ribak Address: Gil Ribak Address: Hollywood, FL 33019 ARTICLE VIII EFFECTIVE DATE: Iffective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business lays 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 the document's effective date in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 designate his certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 04/26/2021 Required Signature Registered Agent Date Submittibite document and affirm that the facts stated herein are true. I am aware that the false information submitted in focument to the Department of State constitutes a third degree felony as provided for in s. 817. 155, F.S. 04/26/2021	Address		_ Address:			
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Address: Hollywood, FL 33019	Name	Gil Ribak		•		
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