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Office Use Only

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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 883609 AUTHORIZATION : \$ 87:50 M. E.C. Maar COST LIMIT : ORDER DATE : June 28, 2021 ORDER TIME : 9:41 AM ORDER NO. : 883609-005 CUSTOMER NO: 8349691 DOMESTIC FILING NAME: ROCKIT CONSULTING, INC. EFFECTIVE DATE: XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP \_\_\_\_\_ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

XX CERTIFIED COPY

\_\_\_\_ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

## **COVER LETTER**

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

SUBJECT: R	OCKIT CO	NSULT:	ING, I			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)			
Enclosed are an ong	inal and one (1) copy of the arti	cles of incorporation and	a check for:			
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fcc & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fcc, Certified Copy & Certificate of Status PY REQUIRED			
<u> </u>						
FROM: Teremy Kalina, Est, Name (Printed or typed)						
4 Montrose Place						
Melville, NY 11747						
(516) 319 - 9803						
Daytime Telephone number						
1K (a) Kalinamattialaw, 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)

TICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:	
3/1 MIRASOL WA	violing auniess, it officients:	
CRAY BEACH, FL 33	UUC	
TICLE III PURPOSE purpose for which the corporation is organized	ais: TO provide consultin	0
ervices to the c	onstruction industrus	
	STATE OF THE PARTY	
ICLE V INITIAL OFFICERS AND/OR DE	006510671	
FICLE V INITIAL OFFICERS AND/OR DE	TEIN Name and Title:	-
TICLE V INITIAL OFFICERS AND/OR DE	TEIN Name and Title:	·
Name and Title: HARVEY ANDKS	TEIN - RESTURN  Name and Title:  OL WAY Address:	
Name and Title: HARVEY ANIKS  Address 16371 MIRAS	TEIN - RESTURN  Name and Title:  OL WAY Address:	
Name and Title: HARVEY ANDKS  Address 16371 MIRAS  DELRAY BEACH	TEIN - PRESTURAT  Name and Title:  OU WAY Address:  FL 33446	
Name and Title: HARVEY ANTKS  Address 16371 MTRAS  DELRAY BEACH	TEIN - RESTURN  Name and Title:  OL WAY Address:	
Name and Title: HARVEY ANDKS  Address 16371 MIRAS  DELRAY BEACH  Name and Title:	TEIN - PRESTURAT  Name and Title:  OU WAY Address:  FL 33446	
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Name and Title: HARVEY ANTKS  Address 16371 MTRAS  DELRAY BEACH  Name and Title:  Address	Name and Title:  Name and Title:  Name and Title:  Address:	33.
Name and Title: HARVEY ANTKS  Address 16371 MTRAS  DELRAY BEACH  Name and Title:  Address	Name and Title:	)n:-
Name and Title: HARVEY ANTKST  Address 16371 MTRAS  DELRAY BEACH  Name and Title:  Address	Name and Title:	333

Name and Title:	Name and Title:				
Address	Address:				
ARTICLE VI REGISTERED AGENT	O. Box NOT acceptable) of the registered agent is:				
Name:	Harvey Anikstein				
Address:	16371 Mirosal Way				
	16371 Mirasol Way Delray Beach, FI 33446				
ADTROLE VIII. INCORDED AND		~>			
ARTICLE VII INCORPORATOR		2021			
Name: Jere Mu K	$\mathcal{E}_{a}(x_{0}, \mathcal{E}_{a})$	2021 JLTI 29			
Address: 4 Mintro	se Place	2.9			
Melville, N	7 11747	PH 5			
<del></del>	<del></del>	. 2			
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of fili	ng:(OPTIONAL)	4-			
(If an effective date is listed, the date mu filing.)	ust be specific and cannot be more than five days prior of	or 90 days after the			
Note: If the date inserted in this block doe the document's effective date on the Depart	es not meet the applicable statutory filing requirements, this	date will not be listed as			
certificate, I am familiar with and accept the	accept service of process for the above stated corporation at the appointment as registered agent and agree to act in this co	the place designated in this apacity			
Kouce / /1		Une 25,2021			
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 \$.817.155, F.S.					
Jeremy Kal		Tune 25 2021			