

P21 000 105 248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

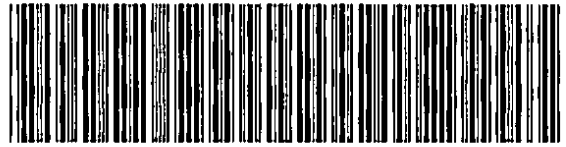
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

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

SUBJECT: Radagast & Roac Inc

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	<u>\$ 78.75</u>
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: Ruth Goran CPA

Name (printed or typed)

8631 Keeler Ave

Address

Skokie, Illinois 60076

City, State & Zip

847-287-7832

Daytime Telephone Number

ruthgoran CPA@gmail.com

E-mail address: (to be used for future annual report notification)

2021 OCT 21 PM 12:55

CD

The undersigned, Uri Ratner, President  
(Name) (Title)  
of Radagast & Roac Inc 821-1392, a foreign  
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of  
Domestication.

**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

**ARTICLE I    NAME**

THE NAME OF THE CORPORATION SHALL BE:

Radagast & Roac Inc

**ARTICLE II    PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address  
1145 16th St. #1101

Miami Beach, Fl 33139-2288

Mailing Address  
1145 16th St. #1101

Miami Beach, Fl 33139-2288

**ARTICLE III    PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any and all lawful business

**ARTICLE IV    SHARES**

THE NUMBER OF SHARES OF STOCK IS: 100

**ARTICLE VI    REGISTERED AGENT AND STREET ADDRESS**


THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Uri Ratner

1145 16th St. #1101

Miami Beach, Fl 33139-2288

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

  
\_\_\_\_\_  
Signature/Registered Agent

12-12-21

\_\_\_\_\_  
Date

REC'D DEC 21 PM 12:55

**ARTICLE V DIRECTORS AND/ OR OFFICERS**

*THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:*

Name & Title: Ari Ratner, Secretary  
Address: 1145 16th St. #1101  
Miami Beach, FI 33139

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: Uri Ratner, President  
Address: 1145 16th St. #1101  
Miami Beach, FI 33139

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

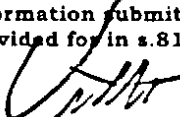
Name & Title: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

I submit this document and affirm that the facts stated herein are true. I am aware that 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.

  
\_\_\_\_\_  
Signature/Authorized Person

12-12-21

\_\_\_\_\_  
Date