

P22000017416

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000070947 3)))



H220000709473ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : PREMIER ADVISORY GROUP INC
Account Number : I20200000085
Phone : (305)370-9567
Fax Number : (305)675-0551

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR -7 PM 1:04

FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SUKKOT4TECH CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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

ARTICLE I NAMEThe name of the corporation shall be: SUKKOT 4 TECH CORP**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address372 Cedarbrook Ln

Mailing address, if different is:

Altamonte Springs, FL 32714**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: To provide technical support and advice in computer and software to companies and the general public.**ARTICLE IV SHARES**

The number of shares of stock is:

100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

Miguel A. Gonzalez
President

Name and Title:

Address

372 Cedarbrook Ln

Address:

Altamonte Springs FL 32714

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR -7 PM 1:04

FILED

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Guillermo Castilla
Address: 8300 W. Flagler St Ste 257-E
Miami, FL 33144

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

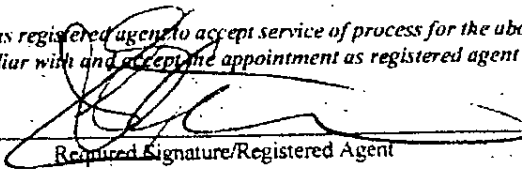
Name: Guillermo Castilla
Address: 8300 W. Flagler St Ste 257-E
Miami, FL 33144

ARTICLE VIII EFFECTIVE DATE:Effective date, if other than the date of filing: 3/3/2022 (OPTIONAL)

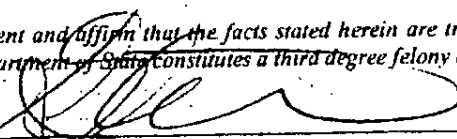
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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


Required Signature/Registered Agent3/3/2022
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.


Required Signature/Incorporator3/3/2022
DateSECRETARY OF STATE
TALLAHASSEE, FLORIDA

2022 MAR -7 PM 1:04

FILED