

P2200005007

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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To:

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

From:

Account Name : USACORP INC.
 Account Number : I20130000019
 Phone : (718)362-4789
 Fax Number : (718)408-2550

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

Chaimeisemann12@gmail.com

Email Address: _____

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 FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS

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FLORIDA PROFIT/NON PROFIT CORPORATION

Refresh Bowls Corporation

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$70.00

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Corporate Filing Menu

Help

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

ARTICLE I NAMERefresh Bowls Corporation
The name of the corporation shall be: _____**ARTICLE II PRINCIPAL OFFICE**Principal street address
6929 Town Harbour Blvd
Boca Raton, FL 33433

Mailing address, if different is: _____

ARTICLE III PURPOSEWe will cater Acai bowls and sell them
The purpose for which the corporation is organized is: _____**ARTICLE IV SHARES** 200
The number of shares of stock is: _____2022 JUN 27 AM 8:20
FLORIDA
STATE
REGISTRATION
DIVISION
OF
THE
ATTORNEY
GENERAL**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Chaim Eisemann, President

Name and Title: _____

Address: 6929 Town Harbour Blvd

Address: _____

Boca Raton, FL 33433

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

_____**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Levi Vogel

Address: 9507 NW 38th Street

Coral Springs, FL 33065
_____FILED
FLORIDA DEPARTMENT OF STATE
ATTESTATION OF FLORIDA
CORPORATION COMMISSIONER

2022 JUN 27 AM 8:20

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:Name: Chaim Eisemann

Address: 6929 Town Harbour Blvd

Boca Raton, FL 33433
_____**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business 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*

/s/ Levi Vogel

6/27/2022

Required Signature/Registered Agent_____
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.*

/s/ Chaim Eisemann

6/27/2022

Required Signature/Incorporator_____
Date

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