

7/29/22, 2:10 PM

Division of Corporations
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

P22000060502

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.

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

From:
 Account Name : INTERSTATE FILINGS LLC
 Account Number : 120110000086
 Phone : (718)569-2703
 Fax Number : (718)504-7890

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

Email Address: _____

2022 JUL 29 PH 3:54

DIVISION OF CORPORATIONS
 FLORIDA DEPARTMENT OF STATE

**FLORIDA PROFIT/NON PROFIT CORPORATION
 IERS EQUIPMENT MARKETING CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: HERS EQUIPMENT MARKETING CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

17 SUTTON PLACE
LAWRENCE, NY 11559

17 SUTTON PLACE
LAWRENCE, NY 11559

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE

ARTICLE IV SHARES 200

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EVA SILBER, PRESIDENT Name and Title: _____

Address: 17 SUTTON PLACE Address: _____
LAWRENCE, NY 11559

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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(cont.)

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: INTERSTATE AGENT SERVICES, LLC
 Address: 100 SE 2ND STREET, SUITE 2000 #209
MIAMI, FL 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EVA SILBER
 Address: 17 SUTTON PLACE
LAWRENCE, NY 11559

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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 Agent

7/29/2022

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/Incorporator

7/29/2022

Date

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