

7/29/22, 2:10 PM

Division of Corporations
 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 : 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 PM 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 NAMEThe name of the corporation shall be: HERS EQUIPMENT MARKETING CORP.**ARTICLE II PRINCIPAL OFFICE**Principal street address17 SUTTON PLACELAWRENCE, NY 11559

Mailing address, if different is:

17 SUTTON PLACELAWRENCE, NY 11559**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE**ARTICLE IV SHARES** 200The number of shares of stock is: 200**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: EVA SILBER, PRESIDENTAddress: 17 SUTTON PLACELAWRENCE, NY 11559

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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(cont.)

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: INTERSTATE AGENT SERVICES, LLC

Address: 100 SE 2ND STREET, SUITE 2000 #209

MIAMI, FL 33131

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: EVA SILBER

Address: 17 SUTTON PLACE

LAWRENCE, NY 11559

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 JUL 29 2022

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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