

P240000 39121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

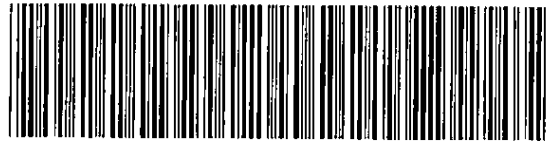
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900418435009

FILED

2024 JUN 10 AM 9:47

RECEIVED

2024 JUN 10 PM 2:45

CLERK OF STATE
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau

850.656.7953

REQUEST DATE 6/10/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1260833

ORDER ENTITY
1135 BRONX RIVER AVE. CORP.

PLEASE PERFORM THE FOLLOWING SERVICES:
1135 BRONX RIVER AVE. CORP. (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$155.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be "W".

FILED
2024 JUN 10 11 19:47
TALLAHASSEE
FLORIDA

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: 1135 Bronx River Ave. Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2436 N. Federal Highway, #181
Lighthouse Point, FL 33064

Mailing address, if different is:

2436 N. Federal Highway, #181
Lighthouse Point, FL 33064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: is to engage in any lawful act or activity for which a corporation may be organized

under Chapter 607 of the Florida Statutes.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mark Fischler, President Name and Title: _____

Address 2436 N. Federal Highway, #181 Address: _____

Lighthouse Point, FL 33064 _____

Name and Title: John Chiapperino, Sec. Treas. Name and Title: _____

Address 87355 Cortes Lake DR. Address: _____

Delray Beach, FL 33446 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
2024 JUL 10 11:19:17

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: Mansfield, Bronstein, & Stone, LLP
Address: 200 E Broward Blvd, Suite 1250
Fort Lauderdale, FL 33301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mark Fischler
Address: 2436 N. Federal Highway, #181
Lighthouse Point, FL 33064

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 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

Mark Fischler
Required Signature/Registered Agent

2/9/24
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.