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

From:
Account Name : Vcorp SERVICES, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

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

Ben-Jacob Servicing Corp.

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

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CORPORATIONS
COMMERCIAL
SERVICES

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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: Ben-Jacob Servicing Corp.

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is:

7196 Via Palomar,

Boca Raton, Florida 33433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The purpose of this Corporation is to engage in any lawful act

or activity for which corporations may be organized under the Florida Business Corporation Act

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ahron Ben-Jacob, Director

Name and Title:

Address 7196 Via Palomar,

Address:

Boca Raton, Florida 33433

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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: Ahron Ben-JacobAddress: 7196 Via Palomar,Boca Raton, Florida 33433**ARTICLE VII INCORPORATOR**The **name and address** of the incorporator is:Name: Ahron Ben-JacobAddress: 7196 Via Palomar,Boca Raton, Florida, 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 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*By: Ahron Ben-Jacob

Required Signature/Registered Agent

07/03/2024

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

07/03/2024

Date