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Division of Corporation P. O. Box 6327 Tallahassee, FL 3231			= 1 = 1 = 1 = 1 = 1	
SUBJECT:	Serafica Fnc. (Proposed corpor	rate name - must include suff	fix)	<u>.</u> -
				71 22 ****
Enclosed is an origina	d and one(1) copy of the articles	s of incorporation and a c	heck for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Louis W. Ratfie	inted or typed)	<u></u> -	
	7326 Lake Wood	rth Rd Address	SECRETA TALLAHA	==
	hake Worth, Fl City,	33 46 7 State & Zip	26 M 8: 37 ARY OF STATE ASSEE, FLORID	CE CE
	561 - 642 - 9888 Daytime Te	elephone number	IDA	.

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under	the I	Florida	Business
Corporation Act, hereby adopts the following Articles of Incorporation.		_	
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ARTICLE I NAME

The name of the corporation shall be:

SERAFICA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9656 PANDANUS WAY, BOYNTON BEACH, FLORIDA 33436

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares of Class A common voting stock at \$1.00 par value per share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

LOUIS W. RATFIELD 7326 Lake Worth Road Lake Worth, Fl 33467

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ROBERT MERKAL 9656 Pandanus Way Boynton Beach, FL 33436

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date