

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

001495.174675

From:

Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

****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
8265 FLORIDA CORP.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 02 |
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Corporate Filing Menu

Help

H12000255961 3

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: 8265 Florida Corp.

ARTICLE II PRINCIPAL OFFICEPrincipal street address
5 Hopal Lane
Monsey, NY 10952

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the corporation laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 200 No par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Philip Herzog Pres/Dir

Address: 5 Hopal Lane

Monsey, NY 10952

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: United Corporate Services, Inc.

Address: 9200 South Dadeland Boulevard, Suite 508

Miami, FL 33156

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Michael A. Barr

Address: 10 Bank St. Ste. 560

White Plains, NY 10606

Having been named as registered agent to accept service of process for the above stated corporation at the place designated this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent
Michael A. Barr, President

10/23/12

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

10/23/12

Date

H12000255961 3