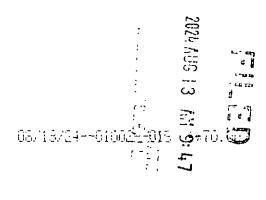
D24000051562

(Requestor's Name)		
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
[

Office Use Only



800433962358



024 AUG 13 AM11: 39

RECEIVED

CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK UP:	BROOK 8/13	_
	CERTIFIED COPY		
XX	РНОТОСОРУ		2024 AUG
	GS		
XX	FILING II	NC	
1.	PREVIAIL-IT SOLUTIONS U	SA, INC.	9:17
0			
2.	(CORPORATE NAME AND DOCUMENT)	#)	
3.			
	(CORPORATE NAME AND DOCUMENT)	井)	
4.	(CORPORATE NAME AND DOCUMENT)	#)	
5.	(CORPORATE NAME AND DOCUMENT)	#)	.
6.		.,	
•	(CORPORATE NAME AND DOCUMENT)	#)	
SPECIAI	LINSTRUCTIONS:		

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE II PRIN	Principal <u>street</u> address	Mailing	address, if different is:	
214 SW 53rd Ct				
ort Lauderdale FL 33	312			
RTICLE III PURP ne purpose for which	OSE the corporation is organized is:			
			232	
				u jj
			47	
RTICLE V INITI	ES 200.00 f stock is: AL OFFICERS AND/OR DIRECTOR Officer	<u>छ</u>	7	
Name and Titl	AL OFFICERS AND/OR DIRECTOR e; AHIKAM BEN-NAIM	RS Name and Title:	7	
RTICLE V INITI	AL OFFICERS AND/OR DIRECTOR	RS Name and Title:	7	
Name and Titl	AL OFFICERS AND/OR DIRECTOR e:AHIKAM BEN-NAIM	RS Name and Title:	7	
Name and Titl Address	AL OFFICERS AND/OR DIRECTOR e: Officer AHIKAM BEN-NAIM 3214 SW 53rd Ct	Name and Title: Address:	7	-
Name and Titl Address	AL OFFICERS AND/OR DIRECTOR Officer AHIKAM BEN-NAIM 3214 SW 53rd Ct Fort Lauderdale FL 33312	Name and Title:	7	
Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTOR e: Officer AHIKAM BEN-NAIM 3214 SW 53rd Ct Fort Lauderdale FL 33312	Name and Title: Address: Name and Title: Address:	7	
Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTOR e: Officer AHIKAM BEN-NAIM 3214 SW 53rd Ct Fort Lauderdale FL 33312	Name and Title:	7	

Name ar	nd Title:	Name and Title:
Address	ldress Address:	
	· · · · · · · · · · · · · · · · · · ·	
	REGISTERED AGENT	
The <u>name and F</u> Name:	<u>Iorida street address</u> (P.O. Box NOT acce AHIKAM BEN-NAIM	otable) of the registered agent is:
·	3214 SW 53rd Ct	
	Fort Lauderdale FL 33312	
ARTICLE VII	<u>INCORPORATOR</u>	2024 AUG
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	AHIKAM BEN-NAIM	
Address:	3214 SW 53rd Ct	3 (19:47
	Fort Lauderdale FL 33312	
Effective date, if	_EFFECTIVE DATE: Tother than the date of filing: date is listed, the date must be specific an	(OPTIONAL) d cannot be more than five days prior or 90 days after the
		plicable statutory filing requirements, this date will not be listed as ecords.
		f process for the above stated corporation at the place designated into the state of the area of the state of
	/S/ AHIKAM BEN-NAIM	08/13/2024
Required Signature/Registered Agent		gent Date
		rein are true. I am aware that the false information submitted in ree felony as provided for in s.817.155, F.S.
/S/ AHIKAM BEN-NAIM		08/13/2024
Requ	ired Signature/Incorporator	Date