Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000016569 3)))



H250000165893ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

**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 SERRATE CORP

Estimated Charge	\$78.75
Page Count	03
Certified Copy	1
Certificate of Status	0

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:		
Servate Corp		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is:		
1122854 5 Terrael, Miami FL, 33174		
<u> </u>		
ARTICLE III SHARES: The number of shares of stock is:		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
lany Serrate		
<i>(P)</i>	2024	SEO
	7024 JAN	JRE:
	<u>_</u>	ASS ASS
	PH	
	ť.	10.1 11.8
	5 [‡]	AD/ ALE
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agent is:		
Lany Serrate		
11774 () The		
11228 sul 5 Terrace,		
ARTICLE VI INCORPORATOR: The name and address of the Incorporator in		
The thine and address of the Theoritoliston is:		
Jany Serrate 11228 SW 5 Terrace Mianu		
11228 SW 57 errace Mianu		
33174 FI		

SECRETARY OF STALL AHASSEE. FL

Required Signatures;

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

Registered Agelit I ate

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 8.817.155, F.S.

Late