Division of Corporations

## Florida Department of State Division of Comorations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FASIKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (385)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

1025 FEB 12

## FLORIDA PROFIT/NON PROFIT CORPORATION

Yoel Service Heating and Cooling, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	0,2
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

Docusign Envelope ID: 2F11E6A6-0A62-4F40-A2F8-B9E17B167664

## ARTICLES OF INCORPORATION

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

CLE II PRINC	IPAL OFFICE Principal street address	N	Mailing address, if different is:	
709 W Sevilla	St			
	29			
CLEHI PURPO		Auto Dealershin		
<del></del>				
		<u> </u>		
		<del></del> -		
LELV SHARE nber of shares of s	ES stock is: 1,000			
nber of shares of s	ES stock is: 1.000  LOFFICERS AND/OR DIRECTO  Yoel Diaz, President	<u>rs</u>		
nber of shares of s LE V INITIA Name and Title	stock is: 1,000  LOFFICERS AND/OR DIRECTO	<b>RS</b> Name and Title:		
nber of shares of s LE V INITIA Name and Title	LOFFICERS AND/OR DIRECTO  Yoel Diaz, President	<b>RS</b> Name and Title:		
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The V INITIA.  Name and Title.  Address	LOFFICERS AND/OR DIRECTO Yoel Diaz, President 3709 W Sevilla St	Name and Title:Address:		
Name and Title. Address	LOFFICERS AND/OR DIRECTO Yoel Diaz, President 3709 W Sevilla St Tampa, FL 33629	Name and Title:		
nber of shares of some of shares of some and Title.  Address  Name and Title:	Nock is: 1,000  LOFFICERS AND/OR DIRECTO Yoel Diaz, President 3709 W Sevilla St Tampa, FL 33629	Name and Title:		
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TEV INITIA.  Name and Title.  Address  Name and Title:	Nock is: 1,000  LOFFICERS AND/OR DIRECTO Yoel Diaz, President 3709 W Sevilla St Tampa, FL 33629	Name and Title:		
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Name and Title: Address  Name and Title:	LOFFICERS AND/OR DIRECTO Yoel Diaz, President 3709 W Sevilla St Tampa, FL 33629	Name and Title:  Address:  Name and Title:  Address:  Name and Title:  Name and Title:		

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Name an	d Title:	Name and Title:		
Address		Address:		
ARTICLE VI	<u>REGISTERED AGENT</u>			
The name and Flo	orida street address (P.O. Box NOT accep	otable) of the registered agent is:	N	
Name:	Yoel Diaz		<u>ज</u> ि	
Address:	3709 W Sevilla St		183	
	Tampa, FL 33629		\(\sigma\) \(\frac{\partial}{2}{2}\)	
			7	
ARTICLE VII	<u>NCORPURATOR</u>		STA	
The name and ad-	dress of the Incorporator is:			
Name:	Yoel Diaz		1,	
Address:	3709 W Sevilla St			
	Tampa, FL 33629			
Effective date, if o	EFFECTIVE DATE: ther than the date of filing: tte is listed, the date must be specific and	. (OPTIONAL)  d cannot be more than five days prior to	or 90 days after the	
Note: If the date i	nserted in this block does not meet the applective date on the Department of State's r	olicable statutory filing requirements, this ecords.	s date will not be listed as	
Having been name certificate, I am fai	ed as registered agent to accept service of pr miliar with and accept the appointment as	ocess for the above stated corporation at a registered agent and agree to act in this c	the place designated in this apacity	
	<b>%</b>		2/11/2023	
Required Signature/Registered Agent		ent	Date	
I submit this document to the De	ment and affirm that the facts stated here partment of State constitutes a third degre	eln are true. I am aware that the false is te felony as provided for in s.817.155, F.S	nformation submitted in a	
	)	*	2/11/2025	
Required Signature/Incorporator		atc	., 11, 1023	