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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GAEL SERVICES CORP

Account Number : I20230000060 Phone

: (305)903-7797 Fax Number : (786)615-3110

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

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## FLORIDA PROFIT/NON PROFIT CORPORATION **HAVENTOR INC**

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

ARTICLE I NAME The name of the corporation	n shall be: Haventor	Inc	
ARTICLE II PRINCIP	PAL OFFICE rincipal street address  The Hall	N	Sailing address, if different is:
ARTICLE III PURPOS The purpose for which the	ecorporation is organized is:	nent.	Consulting
	ock is: 100 OFFICERS AND/OR DIRECTORS Karla S Ruiz P	Name and Title:	
Address	535 SW 5844 AV		
Name and Title: Address			
Name and Title:			
_			

Name and Title:	Name and Title:	
Address	Address:	<u></u>
_		
<del></del>		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptate	nle) of the registered agent is:	
Name: Karla S Ruiz		
Address: 535 SW SBM AN	<del></del>	
Miam: FL 331	<del>44</del>	
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:		
Name: Karla S Ruiz	•	
Address: 535 5w 56th	· Au	
Minaili FL 331	usl .	
Miami to son	17	
ARTICLE VIII EFFECTIVE DATE:  Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and of filing.)	25 (OPTIONAL) annot be more than five days prior	or 90 days after the
Note: If the date inserted in this block does not meet the applie the document's effective date on the Department of State's received.		is date will not be listed as
Having been named as registered agent to accept service of proceedificate, I am familiar with and accept the appointment as reg	ess for the above stated corporation a gistered agent and agree to act in this	t the place designated in this capacity
		2-6-25
Required Signature/Registered Agent	<del></del>	Date
I submit this document and affirm that the facts stated herein document to the Department of State constitutes a third degree,		
		2-6-25
Required Signature/Incorporator	Date	<u> </u>
		3 20
		<b>&gt;</b> : (
		AM 12:
		> <del>*</del>

**⋖**