

N13000005845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

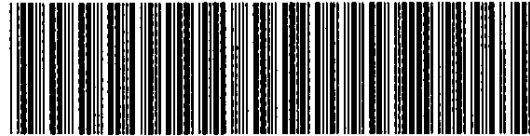
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000248300510

05/30/13--01010--015 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JUN 24 AM 11:11

FILED

W12-72177
624



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2013

LISA GARZA
350 BUSINESS PARKWAY SUITE 104
ROYAL PALM BEACH, FL 33411

SUBJECT: SOUTH FLORIDA PINES EAGLE NEST, INC.
Ref. Number: W13000032177

We have received your document for SOUTH FLORIDA PINES EAGLE NEST, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 113A00013890

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: South Florida Times Eagle News, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: LISA GNEZA
Name (Printed or typed)

350 BUSINESS PARKWAY SUITE 104
Address

RAVAIL PALM BEACH FLORIDA, 33411
City, State & Zip

561-385-5585
Daytime Telephone number

292761@comcast.net
E-mail address: (to be used for future annual report notification)

RECEIVED
DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

13 JUN 26 AM 11:11

FILED

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: South Florida Pine Englewood Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

Mailing address, if different is:

350 Business Parkway

Suite 104

Royal Palm Beach, FL 33411

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Education and Environmental
& Research.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

By Voting

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lisa Garza President Name and Title:

Address: 350 Business Parkway Address:

Suite 104

Royal Palm Beach, FL 33411

Name and Title: ABEL GARZA OFFICER Name and Title:

Address: 350 Business Parkway Address:

Suite 104

Royal Palm Beach, FL 33411

Name and Title: Name and Title:

Address: Address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JUN 24 AM 11:11

FILED

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: LISA GARZA

Address:

350 BUSINESS PARKWAY Suite 104
ROYAL PALM BEACH, FL 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LISA GARZA

Address:

350 BUSINESS PARKWAY Suite 104
ROYAL PALM BEACH, FL 33411

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

13 JUN 24 AM 11:11

FILED

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

Required Signature of Registered Agent

5/28/13

Date

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

Required Signature of Incorporator

5/28/13

Date