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TRANSMITTAL LETTER

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

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-08/20/01--01093--021
*****87.50 *****87.50

SUBJECT: Angel Inn, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status
ADDITIONAL COPY REQUIRED

FROM: William Grau
Name (Printed or typed)

526 N. Riverside Dr.
Address

New Smyrna Beach, FL 32168
City, State & Zip

386-423-4068
Daytime Telephone number

FILED
01 AUG 20 PM 3:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

*2 paw
8/21/01*

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Angel Inn, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

526 N. Riverside Drive, New Smyrna Beach, FL 32168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

one hundred (100)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

M. Patricia Grau, 526 N. Riverside Dr., New Smyrna Beach, FL 32168, Director

William C. Grau, Jr., 526 N. Riverside Dr., New Smyrna Beach, FL 32168, Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

M. Patricia Grau, 526 N. Riverside Dr., New Smyrna Beach, FL 32168

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

M. Patricia Grau, 526 N. Riverside Dr., New Smyrna Beach, FL 32168

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

M. Patricia Grau
Signature/Registered Agent

8/16/01
Date

M. Patricia Grau
Signature/Incorporator

8/16/01
Date

FILED

01 AUG 20 PM 3:20

SECRETARY OF STATE
TALLAHASSEE FLORIDA