

FD3000039931

Dorothy McFarlane  
306 N. 1st, N. 1st Dr.  
Jacksonville, FL 32226

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

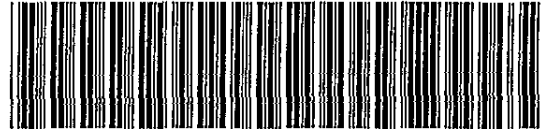
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000014940120

04/04/03--01035--010 \*\*78.75

FILED  
03 APR -4 PM 2:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT:

Port Royal Investment Group, 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:

Donovan McFarlane  
Name (Printed or typed)

3056 Misty Marsh Drive  
Address

Jacksonville, FL 32226  
City, State & Zip

(904) 821-9906  
Daytime Telephone number

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

Articles of Incorporation of  
Port Royal Investment Group, Inc..

**Article 1.**

The name of the corporation is Port Royal Investment Group,

**Article 2.**

The corporation is authorized to issue 100,000 shares.

**Article 3.**

The name of the registered agent and street address of the registered office is Donavan McFarlane, 3056 Misty Marsh Drive, Jacksonville, FL 32226.

**Article 4.**

The name and address of each incorporator is: Keith Collins, 3056 Misty Marsh Drive, Jacksonville, FL 32226.

**Article 5.**

The principal mailing address of the corporation is 3056 Misty Marsh Drive, Jacksonville, FL 32226.


**Article 6.**

The corporation is organized for any purpose which is lawful.

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 Agent

4/2/05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Incorporator

4/2/05  
\_\_\_\_\_  
Date

**FILED**  
03 APR -4 PM 2:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA