

P0300015 7788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

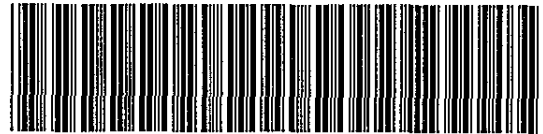
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700025495027

12/16/03--01064--005 **78.75

FILED

03 DEC 16 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

ajc/12/16

TRANSMITTAL LETTER

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

SUBJECT: THE ART DEPT. SOUTH FLORIDA, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: CLIFF BURKS
Name (Printed or typed)

4698 ADDISON STREET
Address

BOCA RATON, FLORIDA 33428
City, State & Zip

(561) 715-6087
Daytime Telephone number

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

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:

THE ART DEPT. SOUTH FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4698 ADDISON STREET - BOCA RATON, FLORIDA 33428

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GRAPHIC DESIGNS - PRINT ART WORK

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

CLIFF BURKS
4698 ADDISON STREET
BOCA RATON, FLORIDA 33428

ARTICLE VI REGISTERED AGENT

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


CLIFF BURKS
4698 ADDISON STREET
BOCA RATON, FLORIDA 33428

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLIFF BURKS
4698 ADDISON STREET
BOCA RATON, FLORIDA 33428

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



Signature/Registered Agent

12/12/03

Date



Signature/Incorporator

12/12/03

Date

FILED
03 DEC 16 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA