

P04000063749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

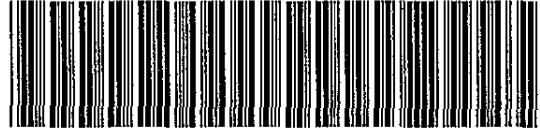
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/12/04--01083--022 **87.50

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04 APR 12 PM 4:19

CLERK OF STATE
TALLAHASSEE, FLORIDA

✓

4/11

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

SUBJECT: Adam Bayer Enterprises, 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: Adam Bayer

Name (Printed or typed)

2119 N 15th Ave

Address

Hollywood, Fl. 33020

City, State & Zip

(954) 579-1718

Daytime Telephone number

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

ARTICLE I NAME

The name of the corporation shall be:
Adam Bayer Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
2119 N 15th Ave
Hollywood, Fl. 33020

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
A conglomeration of businesses mostly dealing with, but not limited to realestate investments.

ARTICLE IV SHARES

The number of shares of stock is:
100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
Adam Bayer
2119 N 15th Ave
Hollywood, Fl. 33020

" President "

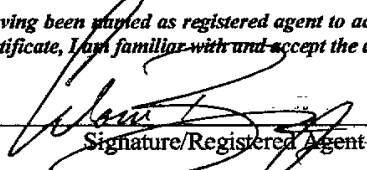
ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
Adam Bayer
2119 N 15th Ave
Hollywood, Fl. 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
Adam Bayer
2119 N 15th Ave
Hollywood, Fl 33020

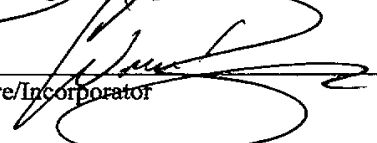
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-9-04

Date



Signature/Incorporator

4-9-04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA