

P040000 882/8

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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(Business Entity Name)

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Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: Sea Wynd Properties Corp.
(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: Eugenie Guy
Name (Printed or typed)

6 Intracoastal Way
Address

Lake Worth, FL 33460
City, State & Zip

561-827-9929
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:

Sea Wynd Properties Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3000 Highridge Rd Suite 15
Boynton Bch, FL 33426

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate, Construction, property mgmt
Mortgage brokage, Development

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):

Eugeniz Guy President / Secretary

ARTICLE VI REGISTERED AGENT

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

Eugeniz Guy
6 Intracoastal way
Lake Worth, FL 33460

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Eugeniz Guy
6 Intracoastal way
Lake Worth, FL 33460

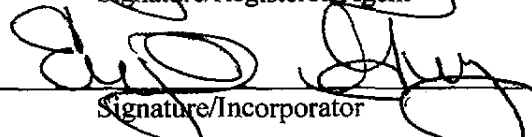
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-1-04

Date



Signature/Incorporator

4-1-04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA