

P04000/00/32

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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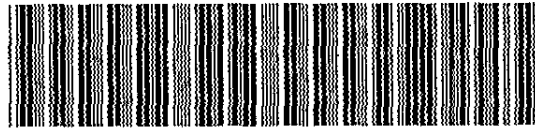
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/17/04--01029--011 **78.75

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04 JUL -2 11 41 AM
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~~WILLIAMS~~
42 7-2

1 TRANSMITTAL LETTER

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

SUBJECT: Next Venture Properties
(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: Logan Abrams
Name (Printed or typed)

14025 Elden Dr.
Address

Charlotte NC 28277
City, State & Zip

704-239-8763
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 17, 2004

LOGAN ABRAMS
14025 ELDON DR
CHARLOTTE, NC 28277

SUBJECT: NEXT VENTURE PROPERTIES
Ref. Number: W04000023520

We have received your document for NEXT VENTURE PROPERTIES and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6884.

Shawn Logan
Document Specialist
New Filings Section

Letter Number: 804A00040624

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:

Next Venture Properties Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14025 Eldon Dr.
Charlotte, NC 28277

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business allowed in the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Logan Abrams, Director	James Boudery, Director	Durrell Salvia, Director
14025 Eldon Dr.	14025 Eldon Dr.	1310 Truman Dr.
Charlotte, NC 28277	Charlotte, NC 28277	St. Augustine, FL 32084

ARTICLE VI REGISTERED AGENT

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

Durrell Salvia
1310 Truman Dr.
St. Augustine, FL 32084

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Logan Abrams
14025 Eldon Dr.
Charlotte, NC 28277

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

Date

Signature/Incorporator

Date

FILED

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