

P04000164974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

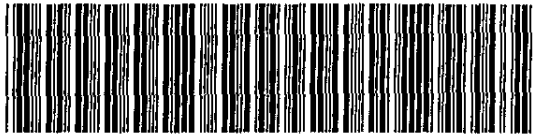
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/06/04--01075--017 **78.75

FILED
04 DEC -6 PM 3:58
FALL RIVER, FLORIDA

✓
12/8/04

TRANSMITTAL LETTER

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

SUBJECT: Associate's Development Center, 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: Anthony Cordileone
Name (Printed or typed)

1801 N. Pine Island Rd. Suite 210
Address

Plantation, FL 33322
City, State & Zip

954-343-4444
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Associate's Development Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

1801 N. Pine Island Rd.
Suite 210
Plantation, FL 33322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Education and career development / any and all things relevant to real estate
including sales techniques, current trends, regulations and legislation

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):

Anthony Cordileone
President, Secretary, Treasurer
1801 N. Pine Island Rd.
Suite 210
Plantation, FL 33322

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

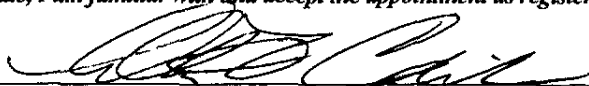
Anthony Cordileone
1801 N. Pine Island Rd.
Suite 210
Plantation, FL 33322

ARTICLE VII INCORPORATOR

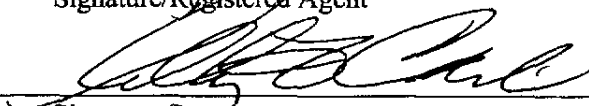
The name and address of the Incorporator is:

Anthony Cordileone
1801 N. Pine Island Rd.
Suite 210
Plantation, FL 33322

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