

P05000060431

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(Business Entity Name)

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C.S.4-2

TRANSMITTAL LETTER

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

SUBJECT: _____

Southern House - SPitality 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: _____

Tivon K. Hart

Name (Printed or typed)

P.O. Box 401

Address

Daytona Beach, FL

City, State & Zip

32115

(386) 255-0817

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 18, 2005

TIVON K. HART
P.O. BOX 401
DAYTONA BEACH, FL 32115

SUBJECT: SOUTHERN HOUSE-SPITALITY
Ref. Number: W05000019539

We have received your document for SOUTHERN HOUSE-SPITALITY and your check(s) totaling \$87.50. 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.

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6047.

Carolyn Lewis
Document Specialist
New Filings Section

Letter Number: 405A00026381

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:

Southern House-spitality Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 401
Daytona Beach, FL 32115

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate

ARTICLE IV SHARES

The number of shares of stock is:

Self-owned 1 only

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

625 Jean Street #8
Daytona Beach, FL
32114

Name

Tivon K. Hart

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tivon K. Hart
P.O. Box 401
Daytona Beach, FL 32115

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

Tivon K. Hart

Signature/Registered Agent

4-11-05

Date

Tivon K. Hart

Signature/Incorporator

4-11-05

Date

FILED
05 APR 13 AM 9 01
TALLAHASSEE, FLORIDA