

PD50000084749

(Requestor's Name)

Verdi Associates  
541 WARWICK LN  
VENTNOC, FL 34293

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

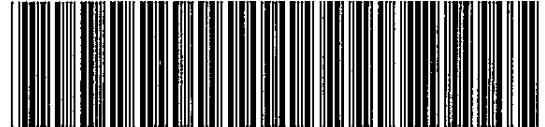
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32310  
05 JUN 13 PM 4:16

05-27198

MRS 6/13

## TRANSMITTAL LETTER

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

SUBJECT: OCEAN PALM APPRAISAL SERVICE, 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: VICTOR M. VERDI  
Name (Printed or typed)

541 WARWICK LANE  
Address

VENICE, FLORIDA 34293  
City, State & Zip

732-829-8397  
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 1, 2005

VERDI ASSOCIATES  
541 WARWICK LN  
VENICE, FL 34293

SUBJECT: OCEAN PALM APPRAISAL SERVICE, INC.  
Ref. Number: W05000027198

RECEIVED  
05 JUN 13 PM 3:12  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for OCEAN PALM APPRAISAL SERVICE, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6879.

Ruby Dunlap  
Regulatory Specialist  
New Filings Section

Letter Number: 405A00038954

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 JUN 13 PM 4:16

**ARTICLE I NAME**

The name of the corporation shall be:

OCEAN PALM APPRAISAL SERVICE, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

505 BAREFOOT TRACE STREET- ST.AUGUSTINE, FLORIDA 32080

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

VARIOUS REAL ESTATE ACTIVITIES

**ARTICLE IV SHARES**

The number of shares of stock is:

100 SHARES (NO PAR)

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

THOMAS J. TAGLIALAVORE-(PRESIDENT) 505 BAREFOOT TRACE ST.  
ST.AUGUSTINE, FLORIDA 32080

**ARTICLE VI REGISTERED AGENT**

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

THOMAS J. TAGLIALAVORE  
505 BAREFOOT TRACE ST.  
ST.AUGUSTINE, FLORIDA 32080

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

THOMAS J. TAGLIALAVORE  
505 BAREFOOT TRACE ST.  
ST.AUGUSTINE, FLORIDA 32080

\*\*\*\*\*

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

Thomas J. Tagliavore  
Signature/Registered Agent

6/8/80  
Date

Thomas J. Tagliavore  
Signature/Incorporator

6/8/80  
Date