

P.05000092783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

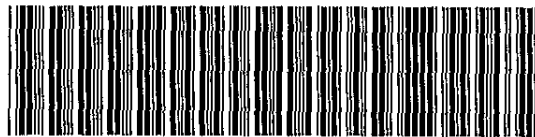
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/29/05--01026--017 **78.75

FILED
05 JUN 29 PM 2:00
SHERRILL COUNTY STATE
TALLAHASSEE FLORIDA

6/29/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: CARLISLE HOTELS, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: HERBERT W. ABRAMSON

Name (Printed or typed)

1717 NORTH BAYSHORE DRIVE, SUITE 1655

Address

MIAMI, FLORIDA 33132

City, State & Zip

305 381 9950

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)

FILED

05 JUN 29 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

CARLISLE HOTELS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1717 NORTH BAYSHORE DRIVE, SUITE 1655
MIAMI, FLORIDA 33132

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
CONSTRUCT AND OPERATE HOTELS

ARTICLE IV SHARES

The number of shares of stock is:
100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANASTASIOS J. JEANNIDIS, PRESIDENT
1717 NORTH BAYSHORE DRIVE, SUITE 1655
MIAMI, FLORIDA 33132

ARTICLE VI REGISTERED AGENT

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

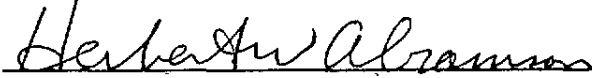
HERBERT W. ABRAMSON,
1717 NORTH BAYSHORE DRIVE, SUITE 1655
MIAMI, FLORIDA 33132

ARTICLE VII INCORPORATOR

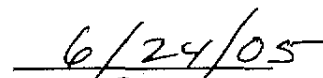
The name and address of the Incorporator is:

ANASTASIOS J. JEANNIDIS,
1717 NORTH BAYSHORE DRIVE, SUITE 1655,
MIAMI, FLORIDA 33132

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



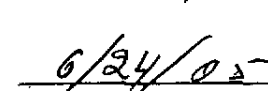
Signature/Registered Agent



Date



Signature/Incorporator



Date