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05 AUG 25 PM 1:46  
SECRETARY OF STATE  
TOLAHASSEE, FLORIDA

J. Silvers AUG 25 2005

TRANSMITTAL LETTER

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

SUBJECT: SUSKEVICH REALTY GROUP, 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: HENRIETTA SUSKEVICH  
Name (Printed or typed)

8891 STAGHORN WAY  
Address

FT. MYERS FL. 33908  
City, State & Zip

239-454-0810  
Daytime Telephone number

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05 AUG 25 PM 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

**ARTICLE I NAME**

The name of the corporation shall be:

*SUSKEVICH REALTY GROUP, INC.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*8891 STAGHORN WAY  
FT. MYERS, FL, 33908*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*RENTAL/SALES OF REAL ESTATE*

**ARTICLE IV SHARES**

The number of shares of stock is:

*10,000*

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

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

*HENRIETTA SUSKEVICH, PRESIDENT  
8891 STAGHORN WAY  
FT. MYERS, FL, 33908*

**ARTICLE VI REGISTERED AGENT**

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

*HENRIETTA SUSKEVICH  
8891 STAGHORN WAY  
FT. MYERS, FL, 33908*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*HENRIETTA SUSKEVICH  
8891 STAGHORN WAY  
FT. MYERS, FL, 33908*

\*\*\*\*\*

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

*Henrietta Suskevich*  
\_\_\_\_\_  
Signature/Registered Agent

*8-24-05*  
\_\_\_\_\_  
Date

*Henrietta Suskevich*  
\_\_\_\_\_  
Signature/Incorporator

*8-24-05*  
\_\_\_\_\_  
Date

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