

PD5000/23489

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TALLAHASSEE, FLORIDA  
05 SEP -6 PM 12:18

MRD  
9/9

## TRANSMITTAL LETTER

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

**SUBJECT:** AGELESS DEVELOPMENT, 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:** ACCOUNTING & CLERICAL BY REEVES & ASSOCIATES, INC.

Name (Printed or typed)

501 GOODLETTE ROAD, SUITE B204

Address

NAPLES, FLORIDA 34102

City, State & Zip

239/434-7757

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  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

AGELESS DEVELOPMENT, INC.

05 SEP -6 PM 12:18

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

28790 SOUTH DIESEL DR, UNIT 6 BONITA SPRINGS, FL 34135

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**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):

LOUIS A. KOVACEVIC 21596 BERWHICH RUN ESTERO, FL 33928 PRESIDENT

ERIN S. KOVACEVIC 21596 BERWHICH RUN ESTERO, FL 33928 VICE-PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

LOUIS A. KOVACEVIC 21596 BERWHICH RUN ESTERO, FL 33928

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


ACCOUNTING & CLERICAL BY REEVES & ASSOCIATES, INC.

501 GOODLETTE ROAD, SUITE B204

NAPLES, FLORIDA 34102

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*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

08/24/05

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

08/24/05

\_\_\_\_\_  
Date