

P07000004116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

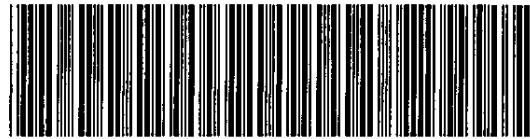
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Arista D'Andrea
AUTHORIZATION BY PHONE TO **GAVE**
CORRECT *Article II*
DATE *1/11/07*
DOC. EXAM *MRS*

Office Use Only



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01/09/07--01024--022 **87.50

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07 JAN -9 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS 1/10/07

COVER LETTER

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

SUBJECT: South Florida Estate Liquidators, 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: Krista D'Andrea

Name (Printed or typed)

9593 N.W. 27th Street

Address

Coral Springs, Florida 33065

City, State & Zip

954-323-8768

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)

ARTICLE I NAME

The name of the corporation shall be:

South Florida Estate Liquidators, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9593 N.W. 27th Street
Coral Springs, Florida 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Estate Liquidations

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):

Krista D'Andrea President
9593 N.W. 27th Street
Coral Springs, FL 33065

Krista D'Andrea, President
9593 N.W. 27th Street
Coral Springs, FL 33065

Ed Soloff, Vice President
4332 West Tradewinds Ave.
Ft. Lauderdale, Florida 33308

Ed Soloff Vice President
4332 West Tradewinds Ave.
Ft. Lauderdale, Florida 33308

ARTICLE VI REGISTERED AGENT

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

Krista D'Andrea
9593 N.W. 27th Street
Coral Springs, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Krista D'Andrea
9593 N.W. 27th Street
Coral Springs, FL 33065

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

Signature/Incorporator

Date

Date

1.4.07

1.4.07