

P080000/0366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

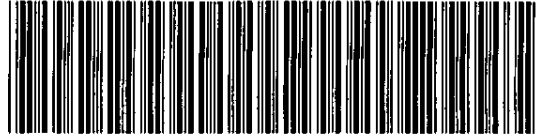
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/28/08--01019--026 **70.00

MRS
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FILED
08 JAN 28 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: ALGERNON PROPERTY MANAGEMENT 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ALGERNON PROPERTY MANAGEMENT INC
Name (Printed or typed)

6810 FRONT STREET #186
Address

KEY WEST, FL 33040
City, State & Zip

305 304-4217
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:

ALGERNON PROPERTY MANAGEMENT INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6810 FRONT STREET # 186

KEY WEST FL 33040

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE OWNERSHIP AND MANAGEMENT OF REAL ESTATE AND ALL OTHER
LEGAL ACTIVITIES NEEDED.

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):

DAVE SHUMAN

6810 FRONT STREET

KEY WEST FL 33040

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

DAVE SHUMAN
6810 FRONT STREET
KEY WEST FL 33040

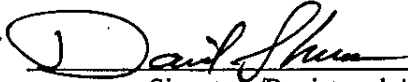
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CHUCK WEITZEL CPA
150 SEA LANE
KEY WEST FL 33040

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

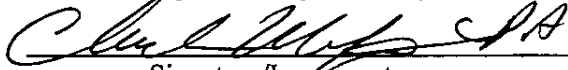
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1/24/08

Date



Signature/Incorporator

1/24/08

Date