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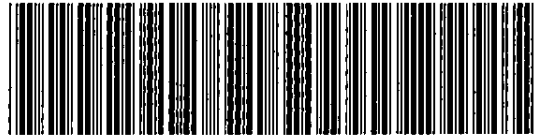
(Business Entity Name)

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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JAN 13 PM 2:43

S McKnight JAN 14 2010

## COVER LETTER

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

**SUBJECT:** Empty Nest Enterprises, 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:** Pamela S Sullivan

Name (Printed or typed)

2700 West Cypress Creek Rd. Suite 108

Address

Ft. Lauderdale Fl. 33309

City, State & Zip

954-971-6711

Daytime Telephone number

pam@sullivansold.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

ARTICLES OF INCORPORATION  
OF  
EMPTY NEST ENTERPRISES, INC.

FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
10 JAN 13 PM 2:43

ARTICLE I  
NAME

The name of the corporation shall be: EMPTY NEST ENTERPRISES INC.

ARTICLE II  
PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 6919 W. Broward Blvd., #230, Plantation, FL 33317.

ARTICLE III  
DURATION

This corporation shall have perpetual existence.

ARTICLE IV  
PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business.

ARTICLE V  
CAPITAL STOCK

This corporation is authorized to issue 1000 shares of One Dollar (\$1.00), par value common stock.

ARTICLE VI  
PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of

this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE VII**  
**INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of this corporation is 6919 W. Broward Blvd.#230,Plantation, FL 33317 and the name of the initial registered agent of this corporation at that address is Pamela S. Sullivan.

**ARTICLE VIII**  
**INITIAL BOARD OF DIRECTORS**

This corporation shall have one (1) director. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1) or more than three (3). The name and address of the director of this corporation is/are:

Pamela S. Sullivan  
6919 W. Broward Blvd., #230, Plantation, FL 33317.

**ARTICLE IX**  
**INCORPORATOR**

The name and address of the Incorporator signing these Articles is: Pamela S. Sullivan, 6919 W. Broward Blvd., #230, Plantation, FL 33317.

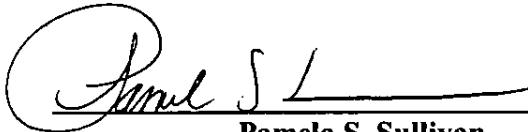
**ARTICLE X**  
**INDEMNIFICATION**

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

**ARTICLE XI**  
**AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned incorporation has executed these Articles of Incorporation this 22 day of December, 2009.

  
\_\_\_\_\_

Pamela S. Sullivan

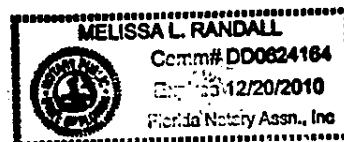
STATE OF FLORIDA                    )  
  ) ss.  
COUNTY OF BROWARD                )

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared **Pamela S. Sullivan**, who produced a driver's license as identification and to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 22 day of December, 2009.

  
\_\_\_\_\_  
NOTARY PUBLIC, State of Florida

My Commission Expires:  
(SEAL)



**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is Empty Nest Enterprises, INC.

2. The name and address of the registered agent and office is:

Pamela S. Sullivan.  
6919 W. Broward Blvd. #203, Plantation, FL 33317.

SIGNATURE: \_\_\_\_\_

Corporate Officer

TITLE: Pamela S. Sullivan,  
Pres. and Director

DATE: December 22, 2009

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JAN 13 PM 2:43

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE: \_\_\_\_\_

Pamela S. Sullivan

DATE December 22, 2009