# P11000080279

(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:				
"NO CHECK"				
,				

Office Use Only



400195713694

08/23/11--01029--003 \*\*87.50

RECEIVED
11 JUL 15 AH II: 99
DIVISION OF CORPORATIONS

ALLAHASSEE, FLORID

WII-37858



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

11 SEP -9 AM 11: 03

August 23, 2011

JUDITH PERRY 925 N HALIFAX AVE #104 DAYTONA BEACH, FL 32118

SUBJECT: RIVER BREEZE VENTURES, INC.

Ref. Number: W11000037858

We have received your document for RIVER BREEZE VENTURES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 411A00017067



# RECEIVED 11 AUG 22 AM IO: 26

# SECRETARY OF STATE FLORIDA DEPARTMENT OF STATE Division of Corporations

July 19, 2011

JUDITH PERRY 925 N HALIFAX AVE #104 DAYTONA BEACH, FL 32118

SUBJECT: RIVER BREEZE VENTURES, INC.

Ref. Number: W11000037858

We have received your document for RIVER BREEZE VENTURES, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees: \$35.00
Registered Agent
Designation \$35.00
Certified Copy \$8.75
Certificate of Status \$8.75

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 411A00017067

### **COVER LETTER**

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

SUBJECT: KIVEL DE			
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	l 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 o
		Status  ADDITIONAL COPY REQUIRE	
FROM: Jud		e (Printed or typed)	
FROM: Jud		e (Printed or typed)	
925	N Halifax Ave #104	Address	
		Address	
Day	rtona Beach, FL 32118	a	· · · · · · · · · · · · · · · · · · ·
	City	, State & Zip	
386	-257-5457		
	Daytime 1	Telephone number	
jper	ryventures@gmail.com		
<del></del>	E-mail address: (to be use	ed for future annual report	notification)

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:

River Breeze Ventures, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

925 N Halifax Ave. #104

Daytona Beach, Fl 32118

#### <u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is:

For any legal or lawful pursuit of business.

#### ARTICLE IV SHARES

The number of shares of stock is: 1,000

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

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

### ARTICLE VI REGISTERED AGENT

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

**Judith Perry** 

925 N Halifax Ave. #104

Daytona Beach, FL 32118

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

**Judith Perry** 

925 N Halifax Ave. #104

Daytona Beach, FL 32118

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

July Julith Parry

July 7, 2011

Date