

P/2000047430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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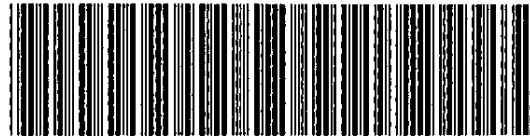
(Business Entity Name)

(Document Number)

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12 MAY 21 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓ 05/22/12

COVER LETTER

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

SUBJECT: METROVEST REALTY GROUP, 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: DEBRA ANN RILEY
Name (Printed or typed)

10150 BELLE RIVE BLVD., #1104
Address

JACKSONVILLE, FLORIDA 32256
City, State & Zip

904-626-3952
Daytime Telephone number

DA1RILEY@COMCAST.NET
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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: METROVEST REALTY GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
12086 Ft. Caroline Road
Suite 502
Jacksonville, Florida 32225

Mailing address, if different is:

10150 BELLE RIVE BLVD #1104
JACKSONVILLE, FLORIDA 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real estate sales and management.

ARTICLE IV SHARES

100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Debra Ann Riley, Director
Address: 10150 Belle Rive Blvd. #1104
Jacksonville, Florida 32256

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Debra Ann Riley
Address: 10150 Belle Rive Blvd. #1104
Jacksonville, Florida 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Debra Ann Riley
Address: 10150 Belle Rive Blvd. #1104
Jacksonville, Florida 32256

12 MAY 21 PM 3:30
RECEIVED DEPT OF STATE
TALLAHASSEE, FLORIDA

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

Debra Ann Riley
Required Signature/Registered Agent

5-16-12
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Debra Ann Riley
Required Signature/Incorporator

5-16-12
Date