

P 12000054590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

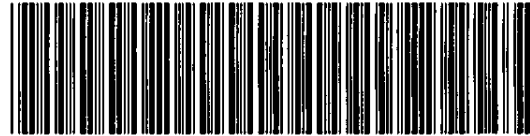
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUN 15 PM 2:49

Ps 6/15/12



REC  
12 JUN 15

SECRET  
THREATS

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 30, 2012

JOHN ROMAINÉ  
1120 SPANISH RIVER RD  
BOCA RATON, FL 33432

SUBJECT: JOHN SCHUYLER  
Ref. Number: W12000029687

We have received your document for JOHN SCHUYLER and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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) 245-6052.

Pamela Smith  
Regulatory Specialist II

Letter Number: 512A00015525

## COVER LETTER

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

SUBJECT: John Schuyler  
(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: John Romaine  
Name (Printed or typed)  
1120 Spanish River Rd  
Address  
Boca Raton FL 33432  
City, State & Zip  
561-504-6229  
Daytime Telephone number  
art@JohnSchuyler.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

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

**ARTICLE I NAME**

The name of the corporation shall be:

John Schuyler Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1120 Spanish River Rd  
Boca Raton FL 33432

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Art Sales

**ARTICLE IV SHARES**

The number of shares of stock is:

~~1000~~ 100

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

Name and Title: John Romaine President  
Address: 1120 Spanish River Rd  
Boca Raton FL 33432

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: John Romaine  
Address: 1120 Spanish River Rd  
Boca Raton FL 33432

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: John Romaine  
Address: 1120 Spanish River Rd  
Boca Raton FL 33432

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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

\_\_\_\_\_  
Required Signature/Registered Agent

5/20/12  
\_\_\_\_\_  
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.

\_\_\_\_\_  
Required Signature/Incorporator

5/20/12  
\_\_\_\_\_  
Date