

P12000062086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

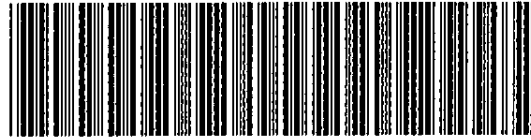
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500237394725

07/13/12--01025--007 **87.50

FILING CANCELLED
RETURNED CHECK

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL 13 PM 2:03

Ps 7/16/12

COVER LETTER

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

SUBJECT: STAR HILL 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: MARK SCHWARTZ
Name (Printed or typed)

10661 AIRPORT PULLING RD STE 16D
Address

NAPLES, FL 34109
City, State & Zip

203-659-4117
Daytime Telephone number

mark@starhillgroup.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: star Hill Group, Inc

12 JUL 13 PM 2:03

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10661 AIRPORT PULLING RD
STE 16 D
NAPLES, FL 34109

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS

FILING CANCELLED
RETURNED CHECK

ARTICLE IV SHARES

The number of shares of stock is: 2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARK SCHWARTZ Name and Title: _____
Address: 10661 AIRPORT PULLING RD Address: _____
STE 16 D
NAPLES, FL 34109

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: MARK SCHWARTZ
Address: 10661 AIRPORT PULLING RD
STE 16 D
NAPLES, FL 34109

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MARK SCHWARTZ
Address: 10661 AIRPORT PULLING RD
STE 16 D
NAPLES, FL 34109

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]
Required Signature/Registered Agent

7/11/12
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.

[Signature]
Required Signature/Incorporator

7/11/12
Date