

P/2000063000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

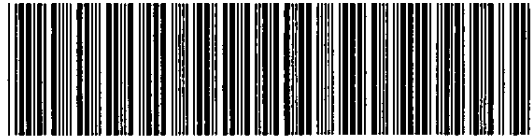
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILING CANCELLED
RETURNED CHECK

07/17/12--01017--015 **87.50

FILED
12 JUL 17 PM 3:13
TALLAHASSEE, FLORIDA

κ 07/18/12

COVER LETTER

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

SUBJECT: STAR HILL GROUP OF S.W. FLORIDA, 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: JEFFREY IHM
Name (Printed or typed)

10661 AIRPORT PULLING RD
Address

NAPLES, FL 34109
City, State & Zip

239-431-5706
Daytime Telephone number

jeff@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)

ARTICLE I NAME

The name of the corporation shall be: Star Hill Group of S.W. FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
10661 AIRPORT PULLING RD
SUITE 16D
NAPLES, FL 34109

Mailing address, if different is:

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: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>JEFFREY IHM</u>	Name and Title:	_____
Address:	<u>10661 AIRPORT PULLING RD</u>	Address:	_____
	<u>SUITE 16D</u>		_____
	<u>NAPLES, FL 34109</u>		_____

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: JEFFREY IHM
Address: 10661 AIRPORT PULLING RD 16D
NAPLES, FL 34109

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JEFFREY IHM
Address: 10661 AIRPORT PULLING RD 16D
NAPLES, FL 34109

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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

[Signature]
Required Signature/Registered Agent

7/16/12
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.

[Signature]
Required Signature/Incorporator

7/16/12
Date