

P12000071691

(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



700238570827

08/20/12--01022--006 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 20 PM 1:16

JP 8/21/12

COVER LETTER

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

SUBJECT: LHINDI, 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: Bessie Petroutsas

Name (Printed or typed)

3300 North University Drive - Suite 500

Address

Coral Springs, FL 33065

City, State & Zip

954.575.2668 (ext. 149)

Daytime Telephone number

bpetroutsas@vantagehospitality.com

E-mail address: (to be used for future annual report notification)

12 AUG 20 PM 1:16

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

LHINDI, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
c/o Vantage Hospitality Group, Inc.
3300 N. University Drive, Ste. 500
Coral Springs, FL 33065

Mailing address, if different is:

12 AUG 20 PM 1:16

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all legal and lawful business permitted in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 (one thousand).

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Roger J. Bloss - President & Director
Address: c/o Vantage Hospitality Group, Inc.
3300 N. University Drive, Ste. 500
Coral Springs, FL 33065

Name and Title: _____
Address: _____

Name and Title: Bernard T. Moyle - VP & Director
Address: c/o Vantage Hospitality Group, Inc.
3300 N. University Drive, Ste. 500
Coral Springs, FL 33065

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: Bessie Petroutsas
Address: 3300 N. University Drive, Ste. 500
Coral Springs, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Bessie Petroutsas
Address: 3300 N. University Drive, Ste. 500
Coral Springs, FL 33065

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

B. Petroutsas
Required Signature/Registered Agent

8.14.2012
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.

B. Petroutsas
Required Signature/Incorporator

8.14.2012
Date