

PI 2000092610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

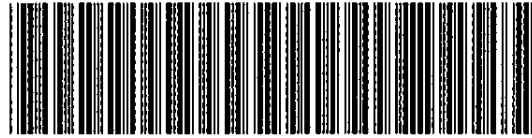
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/05/12--01023--004 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD H/K

COVER LETTER

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

SUBJECT: Timeshare Ventures 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: Jay Hutchings

Name (Printed or typed)

11231 US Hwy 1 # 129

Address

North Palm Beach, FL 33408

City, State & Zip

910-443-1697

Daytime Telephone number

Jows61364@mypacks.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: Timeshare Ventures Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
1660 Twelve Oaks Way #104
North Palm Beach, Fl 33408

Mailing address, if different is:
11231 US Hwy # 1 Box 129
North Palm Beach, Fl 33408

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Timeshare Management & Sales

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John Hutchings
Address: 1660 Twelve Oaks Way 104
North Palm Beach, Fl 33408

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:

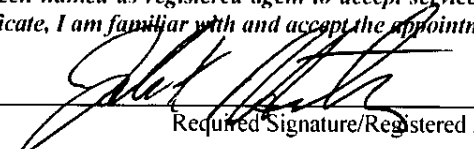
Name: John Hutchings
Address: 1660 twelve Oaks Way 104
North Palm Beach, Fl 33408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

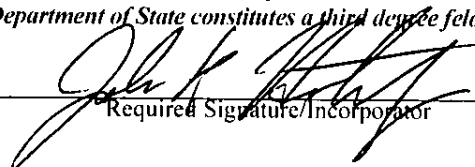
Name: John Hutchings
Address: 11231 US Hwy # 1 Box 129
North Palm Beach, Fl 33408

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

11/2/12
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

11/2/12
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA