

P13000002530

(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



500242242925

01/07/13--01013--004 **87.50

FILED
13 JAN -7 AM 8:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1/8
[Signature]

COVER LETTER

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

SUBJECT: Halifax Harbor Capital, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Bruce Stone

Name (Printed or typed)

468 Riverside Dr.

Address

Ormond Beach, FL 32176

City, State & Zip

386-310-7994

Daytime Telephone number

brucestone10@trader0848.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: **Halifax Harbor Capital, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

468 Riverside Dr.

Ormond Beach, FL 32176

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Portfolio Management**

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Bruce Stone - President/CEO/Principal Agent**

Address: **468 Riverside Dr.**

Ormond Beach, FL 32176

Name and Title: **Carol L. Stone - Vice President, CFO, Secretary**

Address: **468 Riverside Dr.**

Ormond Beach, FL 32176

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: **Bruce Stone**

Address: **468 Riverside Dr.**

Ormond Beach, FL 32176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Carol L. Stone**

Address: **468 Riverside Dr.**

Ormond Beach, FL 32176

Having been named as registered agent to accept service of process for the above stated corporation in the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Bruce Stone

Required Signature/Registered Agent

January 2, 2013

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.

Carol L. Stone

Required Signature/Incorporator

January 2, 2013

Date

FILED
13 JAN -7 AM 8:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA