P1300015033

,		
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<i>e #</i>)
PICK-UP		MAIL
(Bu	siness Entity Nan	ne)
(
	cument Number)	
(50	oument number)	
	0 . 117	
Certified Copies	_ Certificates	of Status
	- <u>-</u>	
Special Instructions to	Filing Officer:	

Office Use Only



02/13/13--01002--006 **70.00

FILED 13 FEB 13 PH12: 42 SECRETARY OF STATE

4/13

COVER LETTER

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

Scarlett Gucciar **SUBJECT:**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

3 \$78.75 Filing Fee & Certificate of Status

\$78.75 **\$87.50** Filing Fee & Certified Copy

Filing Fee, Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

Charles E. Scarlett Name (Printed or typed) FROM: ____ 25 Seabreeze Auc Third Floor Address Delray Beach FI, 33483 City. State & Zin 561 - 278 - 6707 Daytime Telephone number SCARCETT C) SGH JOWNERS, COM E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

21 1	ARTICLES OF INCO		
ARTICLE I M. The name of the corpo	ame oration shall be: Scarlett, Guca	ciardo 4	Hirsch P.A.
	RINCIPAL OFFICE Principal street address		Mailing address, if different is
	preeze Ave		
Third F			S
,	Beach F1, 33483		100 3
ARTICLE III PL The purpose for whic	h the corporation is organized is: <u>for H</u>	ne practi	ie of low, for
·		•	
. <u> </u>			
ARTICLE IV SI	HARES		
The number of shares			
<u>ARTICLE V IN</u>	ITIAL OFFICERS AND/OR DIRECTOR	<u>s</u>	
Name and T	ille: Charles Scarlett, Dirette	&Name and Ti	He: Browtord M. Gucciardo, Diretor
Address	25 Seabrieze Aur	_ Address:	25 Senbruze Ave
	Third Floor	-	Thirdfloor
	Debray Beach F1 33483		Delray Bench F1. 33483
Name and Tit	110: Scott Hirsub, Director	Name and Ti	tle:
Address	25 Scobruzze Ave		
	Third Floor		
	Delray Beach FI 33483)	
Name and Tit	:le:	Name and Ti	tle:
Address		_ Address:	
		-	
		_	

ı.

ل

4

,		(conti.)
		FILED
Name and Title:	Name and Title:	13 FEB 13 PH 12: 42
		BCONT
Address	Address:	SECHTIARY OF STATE TALLAHASSEE, FLORIDA
		·····································

ARTICLE VI REGISTERED AGENT

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

Name:

Address:

	Charles E Scarlett
s:	25 Sendruzze Ave. Third Floor
	Delroy Beach FI. 33483

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

Charley E Scarlett 25 Seabreeze Ave Third Floor Delray Beach, FI, 33483

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

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