

P13000093528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

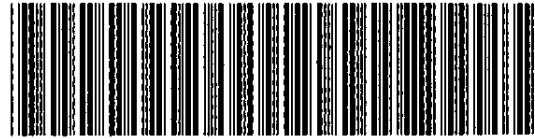
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/30/13--01007--002 **70.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 NOV 15 AM 10:24

[Signature]
11-18-13

James O'Neill
10403 NW 5th Court
Plantation, Fl 33324
954-610-0228

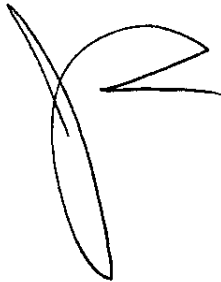
10/28/2013

To: Florida Division of Corporations

Hello,

**I am requesting that the corporation Atlantic Coast Appraisal,
Inc document #P10000084653 be dissolved so that I can file a new
corporation under the same name.**

Sincerely, James O'Neill

A handwritten signature in black ink, consisting of a large, stylized 'J' followed by a horizontal line and a small upward stroke.

COVER LETTER

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

SUBJECT: Atlantic Coast Appraisal, 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: James O'Neil
Name (Printed or typed)

10403 NW 5 ct
Address

Plantation, FL 33324
City, State & Zip

954-610-0228
Daytime Telephone number

james@acappraisalinc.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 31, 2013

JAMES O'NEILL
10403 NW 5 COURT
PLANTATION, FL 33324

SUBJECT: ATLANTIC COAST APPRAISAL, INC.
Ref. Number: W13000060695

RECEIVED
13 NOV 15 AM 9:59
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ATLANTIC COAST APPRAISAL, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 513A00025427

ARTICLES OF INCORPORATION

In compliance with Chapter 637 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Atlantic Coast Appraisal Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10403 NW 5 ct

Plantation, FL 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Appraisal

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James O'Neil Name and Title: _____

Address 10403 NW 5 ct Address: _____

Plantation FL 33324 _____

President _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

13 NOV 15 AM 10:24

SECRETARY OF STATE
DIVISION OF CORPORATIONS

(cont.)

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: James O'Neil

Address: 10403 NW 5 Ct

Plantation FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James O'Neil

Address: 10403 NW 5 Ct

Plantation FL 33324

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

10-28-13

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

11-13-13

Date