P1400019714

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		•

Office Use Only



100257176451

03/03/14--01035--010 **87.50

SECRETARY OF STATE



COVER LETTER

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

	ADAR	ENT	ERPR	ISES	INC
SHID IDAT.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				11 1 🔾

(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: Stanley Chinsky
Name (Printed or typed)
3300 Bonita Beach Road #104
Address
Bonita Springs, Florida 34134
City, State & Zip
239-825-1218
Daytime Telephone number
stanleychinsky@gmail.com E-mail address: (to be used for future annual report notification)
12 man address, (to be ased for rather 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)

The name of the corporat	Eion shall be: ADAR ENTERPRI	SES INC.		
ARTICLE II PRII	NCIPAL OFFICE Principal street address		fress, if different is:	
3300 Bonita B	each Road			
#104 ·		·		
Bonita Springs	s, Fl. 34134			
ARTICLE III PURI The purpose for which the	POSE he corporation is organized is:	a retail store to se	ll tobacco prod	ucts.
		· · · · · · · · · · · · · · · · · · ·		
				u^gat e
			<u></u>	100 C
			35	<u> </u>
		,	ယ်	77. 77. 77.
ARTICLE IV SHA The number of shares of	RES 100			PART C
The number of shares of	SIOCK IS.		= :+3	
	TIAL OFFICERS AND/OR DIRECTOR	<u>§</u>	డు	8
Name and Title	Stanley Chinsky, President	Name and Title:		
Address	743 St. Georges Ct.	Address:		
	Naples, Fl. 34110	ing the state of t	· · · · · · · · · · · · · · · · · · ·	
A Name and Title:	R. Chinsky, Sec and Treasurer	Name and Title:		
Address	7/13 St. Goorgee Ct.			
	Naples, Fl. 34110			
Name and Title:		Name and Title:	······································	
Address				
Audress				

Name an	d Title:	Name and Title:	
Address	<u> </u>	Address:	
ARTICLE VI	REGISTERED AGENT	afala maissand anna in	
	lorida street address (P.O. Box NOT acceptable) Stanley Chinsky	of the registered agent is:	
Name: Address:	743 St. Georges Ct.	_	
Audiess.	Naples, Fl. 34110		
ARTICLE VII	INCORPORATOR		
The <u>name and a</u>	ddress of the Incorporator is:		
Name:	Stanley Chinsky		
Address:	743 St. Georges Ct.		
	Naples, Fl.		
Having been nai his certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as t	ess for the above stated corp registered agent and agree to	poration at the place designated in o act in this capacity
Stan	chem_		2/22/14
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein a Department of State constitutes a third degree fel		
Sta	- Che-		2/27/14
	Required Signature/Incorporator		