# P14000020026

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(Address)
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(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

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

### SUBJECT: Lighthouse Market Values, 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

\$78.75Filing Fee& Certified Copy

■ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Gary Ferguson

Name (Printed or typed)

8 Grand Bay Circle

Address

## Juno Beach, FL 33408

City, State & Zip

## 561 352 8144

Daytime Telephone number

#### gl.ferguson@comcast.net

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

March 11, 2013

LIGHTHOUSE MARKET VALUES, INC. 8 GRAND BAY CIRCLE JUNO BEACH, FL 33408

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

The registered agent must have a Florida street address.

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.

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Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 813A00005724

www.sunbiz.org

	ARTICLES OF INC In compliance with Chapter 607 an		ofit)
ARTICLE I NAM	ion shall be: Lighthouse Marke	et Values, Inc.	
	NCIPAL OFFICE Principal <u>street</u> address	Mailing	13 APR 11 PH 12: 32 g address, if different is:
8 Grand Bay C	Sircle		SECRETARY OF STATE TALLAHASSEE FLORIDA
Juno Beach, F	FL 33408		
ARTICLE III PURI The purpose for which the	POSE the corporation is organized is: Reside	ntial Appraisal ar	nd Consulting Services
·····			
	TAL OFFICERS AND/OR DIRECTO		
Name and Title	Gary Ferguson, Pres.	Name and Title:	
Address	8 Grand Bay Circle	Address:	
	Juno Beach, FL 33408		. <u> </u>
Name and Title			
Address			
Name and Title:		Name and Title:	
Address	<b></b>	Address:	
	<u></u>		

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	(conti.)
Name and Title:	Name and Title:
·	42 100 11 PM 12: 32
Address	Address: <u>13 APR 11 TITLE SE</u> SECRETARY 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:	Leslie Chaloux	
Address:	8 Grand Bay Circle	
	Juno Beach, FL 33408	

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:	Gary Ferguson		
Address:	8 Grand Bay Circle		
	Juno 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

X Serie Chaliny Required Signature/Registered Agent

4/8/2013 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.

in Required Signature/Incorporator

4/8/2013

Date