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COVER LETTER

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

SUBJECT: Palm Beach Vivtage Home 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
Filing Fee
& Certified Copy

* \$87.50 Filing Fee, Certified Copy

& Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Jehn Finger

Name (Printed or typed)

619 Sunset Rd

Address

West Palm Beach FL 33401

City, State & Zip)

561-718-7291

Daytime Telephone number

Jafii Well South, Net

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) <u>ARTICLE I</u> NAME Palm Beach Vintage Home INC The name of the corporation shall be: PRINCIPAL OFFICE Mailing address, if different is: Principal street address South Dixie Hwy SUNSET Rel Palm Beach FL 33401 ARTICLE III PURPOSE The purpose for which the corporation is organized is: ALL legal business ARTICLE IV SHARES 100 The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Gregory Chappell Pres Name and Title: John Finger V. Pres

Address 1500 NOT Mandy Rd Address: 619 Sunset Rd West Palm Beach, Fl ANN Arbor, MI 33401 Name and Title: Address Address: _____ Name and Title: Name and Title: Address _ Address:

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: John Finger	<u></u>
Name: John Finger Address: 619 Sunset West Palm Be	Rd.
West Palm Be	each, fl.
	33401
ARTICLE VII INCORPORATOR	
The name and address of the incorporator is:	
Name: John Finger	
Address: 619 SUNSet	- Kd_
Name: John Finger Address: 619 Sunset West Palm C	each, Flazur
Having been named as registered agent to accept serve	ice of process for the above stated corporation at the place designated in intment as registered agent and agree to act in this capacity
Required bignature/Registers	
Required Eignature/Registere	ed Agent Date
I submit this document and affirm that the facts state document to the Department of State constitutes a third	d herein are true. I am aware that the false information submitted in a t degree felony as provided for in s.817.155. F.S.
Required Signature/Incorp	1/
Required Signature/Incorp	orator