

P 15000029419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

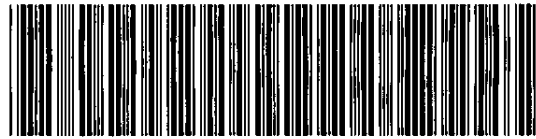
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300271244833

03/31/15--01011--024 **70.00

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

15 MAR 31 PM 2:23

NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED

15 MAR 31 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/1/15

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP:

3/31

☐ CERTIFIED COPY

☒ PHOTOCOPY

☐ CUS

☒ FILING

Corp.

1. PT3 Bent Tree Capital Corp.
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

FILED
15 MAR 31 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS:

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME
The name of the corporation shall be: PT3 BENT TREE CAPITAL CORP.

15 MAR 31 AM 8:42

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

165 Bent Tree Drive

Palm Beach Gardens, FL 33418

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____
to engage in any lawful act or activity for which a corporation can be formed under the Florida Corporation Law

ARTICLE IV SHARES 200
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Paul Trupia III, President & Director</u>	Name and Title: <u>Paul Trupia, Vice President & Director</u>
--	---

Address: <u>165 Bent Tree Drive</u>	Address: <u>165 Bent Tree Drive</u>
<u>Palm Beach Gardens, FL 33418</u>	<u>Palm Beach Gardens, FL 33418</u>

Name and Title: <u>Elizabeth Trupia, Secretary & Director</u>	Name and Title: _____
---	-----------------------

Address: <u>165 Bent Tree Drive</u>	Address: _____
<u>Palm Beach Gardens, FL 33418</u>	

Name and Title: _____	Name and Title: _____
-----------------------	-----------------------

Address: _____	Address: _____
----------------	----------------

(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: Paul Trupia
Address: 165 Bent Tree Drive
Palm Beach Gardens, FL 33418

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Paul Trupia
Address: 165 Bent Tree Drive
Palm Beach Gardens, FL 33418

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

By: Paul Trupia March 31, 2015
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.

Paul Trupia March 31, 2015
Required Signature/Incorporator Date
Paul Trupia

FILED
15 MAR 31 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA