

P15000080193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

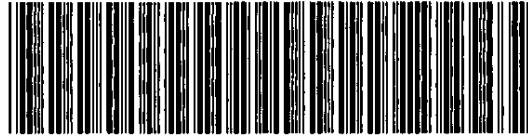
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/21/15--01016--019 **78.75

SECRETARY OF STATE
TALLAHASSEE FLORIDA

15 SEP 21 AM 10:16

APPROVED
AND
FILED

1/11

COVER LETTER

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

SUBJECT: Surf Park Development Corp.

(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: KEVIN C. HODGENS

Name (Printed or typed)

2022 PARADISE OAKS CT.

Address

ATLANTIC BEACH, FL 32233

City, State & Zip

904-607-1600

Daytime Telephone number

surfparkdevelopmentcorp@gmail.com

E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S.

15 SEP 21 AM 10:16

ARTICLE I NAME

The name of the corporation shall be: SURF PARK DEVELOPMENT CORP

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address
2022 PARADISE OAKS CT.

Mailing address, if different is:

ATLANTIC BEACH, FL 32233

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KEVIN C. HODGENS, PRESIDENT

Name and Title: _____

Address 2022 PARADISE OAKS CT

Address: _____

ATLANTIC BEACH, FL 32233

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

APPROVED
AND
FILED

15 SEP 21 AM 10:16

Name and Title: _____	Name and Title: <u>SECRETARY OF STATE</u>
Address _____	Address: <u>TALLAHASSEE, FLORIDA</u>
_____	_____
_____	_____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: KEVIN C. HODGENS

Address: 2022 PARADISE OAKS CT.

ATLANTIC BEACH, FL 32233

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: KEVIN C. HODGENS

Address: 2022 PARADISE OAKS CT.

ATLANTIC BEACH, FL 32233

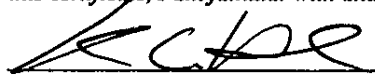
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 18 SEPTEMBER 2015. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

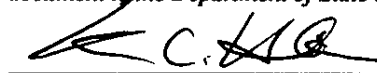
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

 Kevin C. Hodgins
Required Signature/Registered Agent

15 SEP 2015
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.

 Kevin C. Hodgins
Required Signature/Incorporator

15 SEP 2015
Date