

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H15000266004 3)))



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To: Division of Corporations
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Phone : (305) 634-3694
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
TONY ROBERTSON DESIGN, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

15 NOV -9 PM 5:07

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FILED
15 NOV -9 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
102654

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COVER LETTER

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

SUBJECT: Tony Robertson Design, 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Rachel Cizenski
Name (Printed or typed)

941 NE 19th AVE #301
Address

Fort Lauderdale, FL 33304
City, State & Zip

954-525-1237
Daytime Telephone number

scd5@wellsouth.net
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 NOV - 9 PM 1:49

FILED

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)

ARTICLE I NAME

The name of the corporation shall be: Tony Robertson Design, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Tony ROBERTSON, INC.
3115 TERRAMAR ST #1
FTL. 33304

Mailing address, if different is:

c/o SCD DEVELOPMENTS
941 NE 19 AVE STE 301
Fort Lauderdale, FL 33304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Interior Design

ARTICLE IV SHARES

The number of shares of stock is: 100.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tony Robertson, President Name and Title: _____

Address 3115 Terramar St. #1 Address: _____
Fort Lauderdale, FL
33304

Name and Title: _____ 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: Kimberly Peil
Address: 941 NE 10th Ave. Ste 301
Fort Lauderdale, FL 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tony Robertson
Address: 3115 Terramar St #1
Fort Lauderdale, FL 33304

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

Kimberly Peil
Required Signature/Registered Agent

11/16/15
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.

Tony Robertson
Required Signature/Incorporator

11/16/15
Date

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