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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03-31-16

COVER LETTER

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

SUBJECT: GROVE HEIGHTS INCORPORATED

(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: JOSEPH F BUBINAK
Name (Printed or typed)
1853 GROVE ST
Address
SARASOTA, FL, 34239
City, State & Zip
941-366-3848
Daytime Telephone number
MISSIONISPOSSIBLE@COMCAST.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)

ARTICLE I NAME

The name of the corporation shall be: GROVE HEIGHTS INCORPORATED

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1853 GROVE ST

SARASOTA, FL, 34239

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The corporation is established to engage in any and all lawful business

or enterprise for which a corporations may be incorporated under the provisions of the Florida Statutes. By way of example

and without limitation the corporation may engage in financial and asset management and consulting services to individuals,

businesses, associations, partnerships, trusts and other entities.

ARTICLE IV SHARES

The number of shares of stock is: 3000 shares | par value of \$0.01/share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSEPH F BUBINAK

Address 1853 GROVE ST

SARASOTA, FL, 34239

Name and Title: JANE F BUBINAK SECRETARY

Address: 1853 GROVE ST

SARASOTA, FL, 34239

Name and Title: JANE F BU8BINAK TREASURER

Address 1853 GROVE ST

SARASOTA, FL, 34239

Name and Title: JOSEPH F BUBINAK DIRECTOR

Address: 1853 GROVE ST

SARASOTA, FL, 34239

Name and Title: JANE F BUBINAK DIRECTOR

Address 1853 GROVE ST

SARASOTA, FL, 34239

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

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: JOSEPH F BUBINAK _____

Address: 1853 GROVE ST _____

SARASOTA, FL, 34239 _____

ARTICLE VII INCORPORATOR

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

Name: JOSEPH F BUBINAK _____

Address: 1853 GROVE ST _____

SARASOTA, FL, 34239 _____

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TALLAHASSEE, FLORIDA

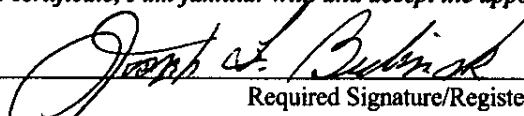
ARTICLE VIII EFFECTIVE DATE:

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

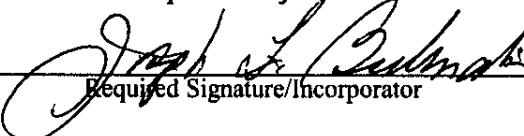


Required Signature/Registered Agent

MARCH 24, 2016

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.



Required Signature/Incorporator

MARCH 24, 2016

Date