# P16000045001

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

16 MAY 24 AM 8: 38

SEGRICALL STAFE TALKAHASSEE, FLORIDA

April 5, 2016

GABRIEL NWAMAH 542 NE 112TH STREET MIAMI, FL 33161

SUBJECT: PRESTIGE HOME INVESTMENT, INC.

Ref. Number: W16000025070

We have received your document for PRESTIGE HOME INVESTMENT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Stacy Prather Regulatory Specialist III

Letter Number: 516A00006911

#### **COVER LETTER**

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

SUBJECT:	PRESTIGE HOI (PROPOSED CORPORAT	ME INVEST TENAME- <u>MUST INCLU</u>	MENT, INC.
Enclosed are an or	riginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	• •	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: GABRIEL NWAMAH Name (Printed or typed)			
_	<del></del>	12 <sup>7th</sup> STRE	EL
_	MIAMI, FL.	33 16 \ State & Zip	

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

### **COVER LETTER**

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

SUBJECT:	SILVER HOME		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an o	riginal and one (1) copy of the a	rticles of incorporation an	d a check for:
□ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  DPY REQUIRED
FROM: _	GABRIEL Nan 542 NE	NWAMAH ne (Printed or typed)  112 <sup>Th</sup> ST	
MIAMI, FL. 33161  City, State & Zip  (786) 747-4130  Daytime Telephone number			
gabrille nwamah & gmail. Com 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 corporat	ion shall be: SILVER HC	MES NVE	STMENT,	INC.	
ARTICLE II PRINC	IPAL OFFICE Principal street address	Mail	ling address, if differe	ent is:	
542 NE MIAMI, F	. 112th STREET L. 33161				
ARTICLE III PURPO The purpose for which the				ING	
				A Love	16 Há Y 24
ARTICLE IV SHARI The number of shares of shares				250 H	24 PH 1:55
	GABRIEL NWAMAH,	Name and Title:			
Address	542 NE. 112th ST.				
	MIAMI, FL. 33161				
Name and Title:		Name and Title:			
Address		Address:			
	<del> </del>				<u></u>
	11 10 TO 11		, , , , , , , , , , , , , , , , , , ,		
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: GABRIEL NWAMAH	
Address: 542 NE. 112Th ST.	
MIAMI, FL. 33161	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: GABRIEL NWAMAH	
Address: 542 NE. 112th ST	
MIAMI, FL. 33161	ं <sup>कर्</sup> <b>्रा</b>
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot	
days after the filing.)	• •
Note: If the date inserted in this block does not meet the applicable s the document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as regi	
Gubrel Dowanish	5-18-16
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are t	true. I am aware that the false information submitted in a
document to the Department of State constitutes a third degree felony	<b></b>
Jubert Dwammen	5-18-16 Date
Required Signature/Incorporator	Date