

P16000092928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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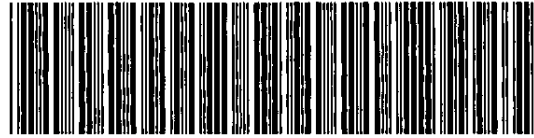
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2016 NOV 21 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

V HERRING
NOV 23 2016

COVER LETTER

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

SUBJECT: 2020 HOMES, 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: Steven Santolla

Name (Printed or typed)

PO BOX 971049

Address

COCONUT CREEK, FL 33097

City, State & Zip

954-347-7244

Daytime Telephone number

steve@flaglerrealty.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)

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ARTICLE I NAME

The name of the corporation shall be: 2020 HOMES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
9999 Equus Circle, Boynton Beach, FL 33492

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing address, if different is:
PO BOX 971049, Coconut Creek, FL 33097

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steven Santolla, President

Address: PO Box 971049
Coconut Creek, FL 33097

Name and Title: Robert Vortolomei, Secretary

Address: PO Box 971049
Coconut Creek, FL 33097

Name and Title: Kenneth Spoonhoward, Vice President

Address: PO Box 971049
Coconut Creek, FL 33097

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

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2016 NOV 21 AM 8:35

SECRETARY OF STATE
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: Steven Santolla
Address: 9999 Equus Circle
Boynton Beach, FL 33492

ARTICLE VII INCORPORATOR

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

Name: Steven Santolla
Address: 9999 Equus Circle
Boynton Beach, FL 33492

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 days prior or 90 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

11-16-16
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

11-16-16
Date