

P/7000039089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

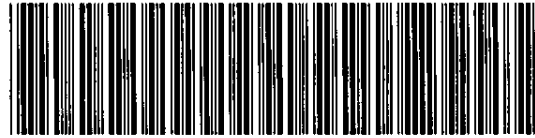
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
17 MAY -1 AM 11:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 05/01/17

05/02/17

COVER LETTER

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

SUBJECT: CHUDNOFF PROPERTY ADVISOR 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: LINDA CHUDNOFF
Name (Printed or typed)

1646 SE 3RD COURT
Address

DEERFIELD BEACH, FL 33441
City, State & Zip

954-540-9452
Daytime Telephone number

LCHUDNOFF@AOL.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 corporation shall be: CHUDNOFF PROPERTY ADVISOR INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1646 SE 3RD COURT

DEERFIELD BEACH, FL 33441

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROFIT, REAL ESTATE SALES

ARTICLE IV SHARES

The number of shares of stock is: 100 (ONE HUNDRED)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LINDA CHUDNOFF

Name and Title: _____

Address 1646 SE 3RD COURT

Address: _____

DEERFIELD BEACH, FL 33441

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ 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: LINDA CHUDNOFF
Address: 1646 SE 3RD COURT
DEERFIELD BEACH, FL 33441

ARTICLE VII INCORPORATOR

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

Name: LINDA CHUDNOFF
Address: 1646 SE 3RD COURT
DEERFIELD BEACH, FL 33441

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TALLAHASSEE, FLORIDA


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 05-01-17 (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

4/26/17

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

4/26/17

Date