

PT7 00047496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

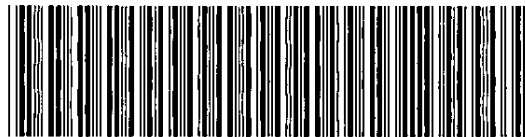
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000299692680

17 MAY 31 PM 4:25

17 MAY 31 PM 4:25

M. MOON

MAY 31 2017

INDIAN OF STUART, LLC
1440 SPORTSMAN LANE NE
PALM BAY, FLORIDA 32905

May 31, 2017

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

17 MAY 31 PM 11:26

RE: AUTHORIZATION FOR USE OF NAME – INDIAN OF STUART, INC.

Dear Sir/Madam:

This letter is to inform you that I expressly hereby authorize the use of the name **INDIAN OF STUART, INC.**, for the formation of a new corporation of which I will be President, Director and Secretary.

Very truly yours,

INDIAN OF STUART, LLC, a Florida limited liability company

By: 

RODIN YOUNESSI, Manager

RECEIVED
2017 MAY 31 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COGENCYGLOBAL

Formerly known as
**NATIONAL
CORPORATE
RESEARCH, LTD.**
The Right Response at the Right Time, Every Time™

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: May 30, 2017

Account#: I20000000088

Name: ERIC HOOD

Reference #: T010148

Entity Name: INDIAN OF STUART, INC.

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFICATE OF STATUS

*FILE
SECOND*

Authorized Amount: \$78.75

Signature: *Eric Hood*

17 MAY 31 PM 4:26
FILE

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: Indian of Stuart, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1440 Sportsman Lane NE

1440 Sportsman Lane NE

Palm Bay, Florida 32905

Palm Bay, Florida 32905

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

To conduct any lawful business under Florida law.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rodin Younessi, PDS

Name and Title: _____

Address 1440 Sportsman Lane NE

Address: _____

Palm Bay, Florida 32905

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

17 MAY 2011 PM 4:25

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: Peter Homer, Esq.

Address: 1441 Brickell Avenue, Suite 1200

Miami, Florida 33131

ARTICLE VII INCORPORATOR

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

Name: Peter Homer, Esq.

Address: 1441 Brickell Avenue, Suite 1200

Miami, Florida 33131

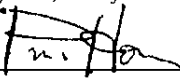
ARTICLE VIII EFFECTIVE DATE:

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.)

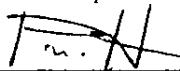
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

5/30/17
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

5/30/17
Date

17 MAY 31 PM 4:25