

P/7000058754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

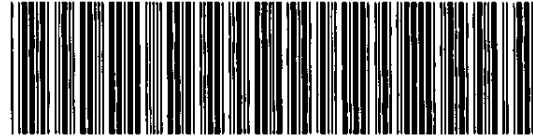
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/10/17--01022--008 **70.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA

07/11/17

COVER LETTER

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

SUBJECT: AVD, 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: Morgan R. Bentley, Esquire

Name (Printed or typed)

783 South Orange Avenue, 3rd Floor

Address

Sarasota, FL 34236

City, State & Zip

941-556-9030

Daytime Telephone number

mbentley@bentleyandbruning.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: AVD, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
5025 W. Knollwood Street
Tampa, FL 33634

Mailing address, if different is:
6146 Turnbury Park Drive
Sarasota, FL 34242

ARTICLE III PURPOSE

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

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CLERK OF DISTRICT COURT
STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicole Davis, President

Address 895 Stalling Avenue
Atlanta, GA 30316

Name and Title: Melissa Etheredge, Secretary

Address: 6146 Turnbury Park Drive
Sarasota, FL 34242

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

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: Morgan R. Bentley, Esquire
Address: 783 South Orange Ave., 3rd Floor
Sarasota, FL 34236

17 JUL 10 AM 9:37
STATE
FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kimberly Ward
Address: 5017 Palm Aire Drive
Sarasota, FL 34243

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

Morgan R. Bentley
Required Signature/Registered Agent

7/3/17
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.

Kimberly Ward
Required Signature/Incorporator

6-26-17
Date