

P18000058915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

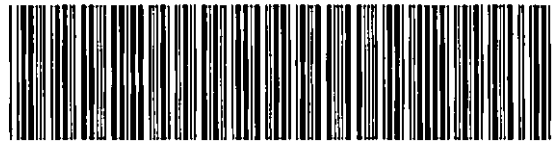
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700314728667

05/20/18--01016--002 **79.75

FILED
2018 JUL -5 PM 7:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. PAGE
JUL 06 2018

COVER LETTER

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

SUBJECT: BEN-X ART Corp.

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: LOUIS BERNARD ANTOINE, MD

Name (Printed or typed)

11979 SW 55 Sreer

Address

Cooper City, FL 33330

City, State & Zip

(954)249-1984

Daytime Telephone number

louisbant@hotmail.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2018

LOUIS BERNARD ANTOINE
11979 SW 55 SREER
COOPER CITY, FL 33330

SUBJECT: BEN-X ART
Ref. Number: W18000057855

We have received your document for BEN-X ART and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Keyna E Page
Regulatory Specialist II

Letter Number: 918A00012945

RECEIVED
2018 JUL -5 PM 12:44
DIVISION OF CORPORATIONS
COMMERCIAL SERVICES
10

FILED
2018 JUL -5 PM 7:38
DIVISION OF STATE
TALLAHASSEE, FLORIDA

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: BEN-X ART CORPORATION (BEN-X ART CORP.)

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11979 SW 55 Street

same as principal office

Cooper City , FL 33330

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

To produce, sell , or exchange Art works and related items

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Louis Bernard Antoine MD, President and

CEO Name and Title: Donnell A Antoine Vice-President

Address 11979 SW 55 Street
Cooper City, FL 33330

Address: 11979 SW 55 Street
Cooper City , FL 33330

Name and Title: Ivy C Antoine , 2nd Vice-President

Name and Title: Renee S Antoine, Secretary

Address 11979 SW 55 Street
Cooper City FL 33330

Address: 11879 SW 55 Street
Cooper City, FL 33330

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
2018 JUL -5 PM 7:38
CLERK 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: Louis Bernard Antoine, MD

Address: 11979 SW 55 Street

Cooper City, FL 33330

ARTICLE VII INCORPORATOR

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

Name: Louis Bernard Antoine, MD

Address: 11979 SW 55 Street

Cooper City, FL 33330

FILED
2018 JUL -5 PM 7:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

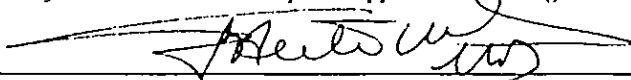
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: July 1, 2018 (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

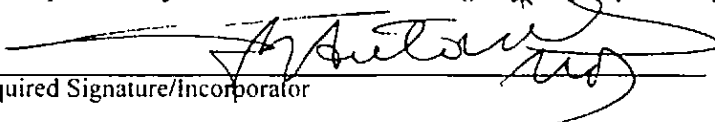


Required Signature/Registered Agent

July 2, 2018

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

July 2, 2018

Date