

P19000002744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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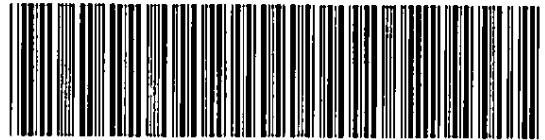
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Robert SKa Kandy Real Estate Broker 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: Robert SKa Kandy
Name (Printed or typed)

203 A Helios Drive
Address

Jupiter Florida 33477
City, State & Zip

561 746 0536
Daytime Telephone number

SKa Kandy broker @ bellgouth.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)

ARTICLE I NAME

The name of the corporation shall be: Robert Skakandy Real Estate Broker Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
203 A Helios Drive
Jupiter
Fl. 33477

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

all legal purposes

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Skakandy, President

Address: 203A Helios Dr
Jupiter Fla 33477

Name and Title: Robert Skakandy, Treas

Address: 203A Helios Dr
Jupiter Fl 33477

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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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: Robert Skukundy
Address: 203A Helios Dr.
Tupata FL 33477

ARTICLE VII INCORPORATOR

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

Name: Robert Skukundy
Address: 203A Helios Dr.
Tupata FL 33477

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: ASAP (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

Robert Skukundy 1-4-19
Required Signature/Registered Agent 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.

Robert Skukundy 1-4-19
Required Signature/Incorporator Date