

P19000 064670

File 2nd

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

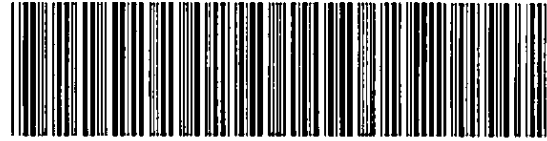
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/09/19--01016--014 \*\*70.00

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19 AUG -9 PM 12:57

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D O'KEEFE

AUG 19 2019

Shelly Ann Grant  
7101 W. McNab Rd. suite 200A  
Tamarac FL 33321  
Re: Dissolution and New company with Same Name Request

Sunbiz  
Division of Corporations

August 6, 2019

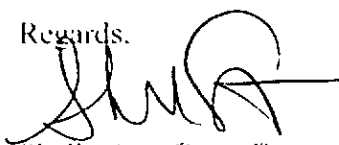
Good afternoon,

I am writing to request that The Vineyard's House Corp., a non-for-profit company in Florida be dissolved first, and I am permitting The Vineyard's House Corp. name be used for the filing of a new PROFIT CORP. I called Sunbiz on 08/05/2019 and was instructed by a representative to send this letter along with the dissolution of the non-profit and the new application for profit for the **same business name** above. Please call me if you have any questions as to what I am requesting you do.

I want the company to 1<sup>st</sup> be dissolved, and 2<sup>nd</sup> to be started as a profit corporation.

Thank you for your assistance in the above matter.

Regards,



Shelly Ann Grant Esq.  
Chair for the non-profit The Vineyard's House, and registered agent.  
[Shelly.grant@gmail.com](mailto:Shelly.grant@gmail.com)  
786-301-0328 cell

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CALL CENTER

63

## COVER LETTER

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

SUBJECT: The Vineyard's House 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 Filing Fee  
☐ \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee.
& Certified Copy	Certified Copy
	& Certificate of
	Status

**ADDITIONAL COPY REQUIRED**

FROM: Shelly Ann Grant  
Name (Printed or typed)

7101 W. McNabb Rd Ste. 200A  
Address

Tamara FL 33321  
City, State & Zip

786 - 301 - 0328  
Daytime Telephone number

shelly.grant@gmail.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: The Vineyard's House Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7101 W. McNab Rd.

Suite 200A, Tamarac Fl  
33321

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Leasing,  
Rental properties.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sean C. Grant Name and Title: President

Address: 7101 W. McNab Rd. Address: \_\_\_\_\_

Suite 200A

Tamarac Fl 33321

Name and Title: Shelly Ann Grant Name and Title: Chair Person

Address: 7101 W. McNab Rd. Address: \_\_\_\_\_

Suite 200A

Tamarac Fl 33321

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ 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: Shelly Ann Grant

Address: 7101 W. McNab Rd. Ste 200A

TAMARAC FL 33321

19 AUG -9 PM 12:57  
CLERK OF THE COURT  
CLERK OF THE COURT

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Shelly Ann Grant

Address: 7101 W. McNab Rd.

Suite 200A TAMARAC FL 33321

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 08/06/19 (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*

[Signature]  
Required Signature/Registered Agent

8/6/19  
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.*

[Signature]  
Required Signature/Incorporator

8/6/19  
Date