

**P20 000011531**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 07535000353  
Phone : (800)221-2972  
Fax Number : (718)889-7420

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Wood Hollow FL Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

**FILED**  
2020 FEB - 7 AM 8:35  
SECRETARY OF STATE  
TALLAHASSEE, FL  
**RECEIVED**  
2020 FEB - 7 AM 10:38  
OFFICE OF THE SECRETARY OF STATE  
DIVISION OF CORPORATIONS

*2/9/2020*

**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: Wood Hollow FL Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

16850-112 Collins Avenue #26916850-112 Collins Avenue #269Sunny Isles Beach, FL 33160Sunny Isles Beach, FL 33160**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

To conduct all activities set forth and permitted under and Florida corporation law

**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Stephane Conrard - Director

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

Address c/o BANYM Inc.

Address: \_\_\_\_\_

16850-112 Collins Avenue #269Sunny Isles Beach, FL 33160

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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 TALLAHASSEE, FL

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: BANYM Inc.

Address: 16850-112 Collins Avenue #269

Sunny Isles Beach, FL 33160

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Stephane Conrard c/o BANYM Inc.

Address: 16850-112 Collins Avenue #269

Sunny Isles Beach, FL 33160

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**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 business days prior or 90 business 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

01/27/2020

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

01/27/2020

Date