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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

****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
PALMWOOD RESEARCH AND DEVELOPMENT, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
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2020DEC16 AM11:01

2020DEC16 PM12:22

COVER LETTER

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

SUBJECT: Palmwood Research and Development, 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 ☐ \$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: Jennifer A. Watkins
Name (Printed or typed)
Nelson Mullins Broad and Cassel, 251 Royal Palm Way Suite 215
Address
Palm Beach FL 33480
City, State & Zip
561-659-8663
Daytime Telephone number
elizabethmohanty@yahoo.com
E-mail address: (to be used for future annual report notification)

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

2020 Dec 16 PM 12:22

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: Palmwood Research and Development, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

15140 Palmwood RoadPalm Beach Gardens, FL 33410**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any and all lawful business.**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Elizabeth Mohanty / PresidentName and Title: Jyoti Mohanty / Secretary / TreasurerAddress 15140 Palmwood Road
Palm Beach Gardens FL 33410Address: 15140 Palmwood Road
Palm Beach Gardens FL 33410

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:Name: Capitol Corporate Services, Inc.Address: 515 East Park Avenue 2nd FLTallahassee, FL 32301**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:Name: John J. Raymond, Jr.Address: 251 Royal Palm Way Suite 215Palm Beach, FL 33480**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*Kim TadlockKim Tadlock, Asst. Sec. on behalf
of Capitol Corporate Services, Inc.

Required Signature/Registered Agent

12-15-2020

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.*John J. Raymond Jr.

Required Signature/Incorporator

12-15-20

Date