

P21000101869

(Requestor's Name)

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PICK-UP WAIT MAIL

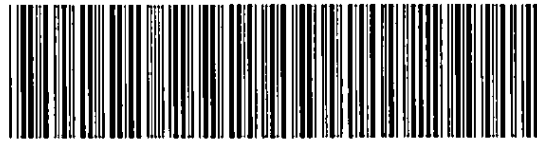
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FL

FLORIDA FILING & SEARCH SERVICES, INC.

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155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/2/21

NAME: EDEN PROPERTIES, INC.

TYPE OF FILING: ARTICLES

COST: 78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A Hodge



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 2, 2021

FLORIDA FILING

SUBJECT: EDEN PROPERTIES, INC.
Ref. Number: W21000153870

TALLAHASSEE, FLORIDA

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We have received your document for EDEN PROPERTIES, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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.

Neysa Culligan
Regulatory Specialist III

Letter Number: 921A00029009

*PLEASE KEEP ORIGINAL file date.
Thank you!*

COVER LETTER

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

Eden House Properties, Inc.

SUBJECT: _____
(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: _____
Glenn R. Abel
Name (Printed or typed)

_____ 16055 Caputo Drive, Suite F
Address

_____ Morgan Hill, CA 95037
City, State & Zip

_____ 408-778-4650
Daytime Telephone number

_____ graapc1@yahoo.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: Eden House Properties, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>3363 Riviera Drive</u> <u>Key West, FL 33040</u>	Mailing address, if different is: _____ _____ _____
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

Management of Properties

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- 2 -
MAY 9 9:38
STATE
OFFICE
OF
CORPORATIONS
TALLAHASSEE, FL

ARTICLE IV SHARES

The number of shares of stock is: 50,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Mike Eden, President</u>	Name and Title: _____
Address: <u>3363 Riviera Drive</u> <u>Key West, FL 33040</u>	Address: _____ _____ _____

Name and Title: <u>Colleen Eden, Vice President</u>	Name and Title: _____
Address: <u>3363 Riviera Drive</u> <u>Key West, FL 33040</u>	Address: _____ _____ _____

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: Mike Eden
 Address: 3363 Riviera Drive
Key West, FL 33040

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 DEPARTMENT OF STATE
 TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Glenn R. Abel
 Address: 16055 Caputo Drive, Suite F
Morgan Hill, CA 95037

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

Mike Eden 11/28/21
 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.

Glenn R Abel 11/28/21
 Required Signature/Incorporator Date