

P22000001785

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 : I20160000017
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
FLORIDA CONGRESS AVE PROJECT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

2022 MAR -8 PM 5:00

2022 MAR -8 PM 7:32
FILED

COVER LETTER

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

SUBJECT: Florida Congress Ave Project, 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: John Herbert
Name (Printed or typed)
101 Vickery Street
Address
Roswell GA 30075
City, State & Zip
404.312.8775
Daytime Telephone number
john@herbertlegalgroup.com
E-mail address: (to be used for future annual report notification)

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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

Florida Congress Ave Project, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3333 Old Milton Pkwy Ste 270
Alpharetta GA 30005

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: See attached.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John Herbert, President & Secretary
Address: 101 Vickery Street
Roswell GA 30075

Name and Title: Machiel Lucas, Director
Address: 101 Vickery Street
Roswell GA 30075

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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Article IV - Authorized Shares

The Corporation shall have authority to issue 200,000 shares consisting of up to 100,000 shares of Class A Shares, \$.01 par value per share (the "Class A Shares") and up to 100,000 shares of Class B Shares, \$.01 par value per share ("Class B Shares").

The holders of Class A Shares shall be entitled to vote on each matter on which the shareholders of the Corporation shall be entitled to vote, and each holder of Class A Shares shall be entitled to one vote for each Class A Share held by such holder. The holders of Class B Shares shall not have any voting rights.

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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: Capitol Corporate Services, Inc.
 Address: 515 E. Park Ave., Floor 2
Tallahassee FL 32301

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 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John Herbert
 Address: 101 Vickery Street
Roswell GA 30075

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

Taylor Seay Taylor Seay, Asst. Sec. on behalf
 of Capitol Corporate Services, Inc. 03/08/2022
 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.

John Herbert 03-08-2022
 Required Signature/Incorporator Date