

P22000042641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

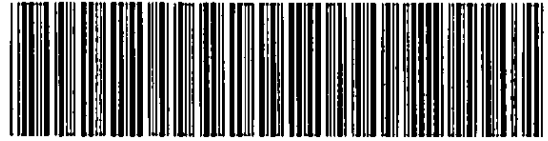
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/04/22--01016--002 **37.50

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2021-7-6 PM 6:57

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:

Prince Vino Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

2101 Ludlum Rd #204
Miami FL 33155

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A private Sommelier
Service company

ARTICLE IV SHARES

The number of shares of stock is:

200 shares, NPV

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

JONATHAN SWAN

Name and Title:

President and

Address

2101 Ludlum Rd #204

Address:

Director

Miami FL 33155

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2022-11-14 PM 6:57

COVER LETTER

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

SUBJECT: Prince Vino Incorporated
(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: JONATHAN SWAN
Name (Printed or typed)
2101 Ludlam Rd #204
Address
Miami FL 33155
City, State & Zip
917 922-6489
Daytime Telephone number
theprincevino@gmail.com
E-mail address: (to be used for future annual report notification)

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

2012/11/14 PM 6:57

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:

~~Jonathan Sward~~ JONATHAN SWARD

Address:

2101 Ludlum Rd #204
Miami FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Jonathan Sward

Address:

2101 Ludlum Rd #204
Miami FL 33155

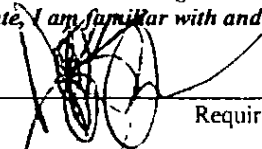
ARTICLE VIII EFFECTIVE DATE:

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

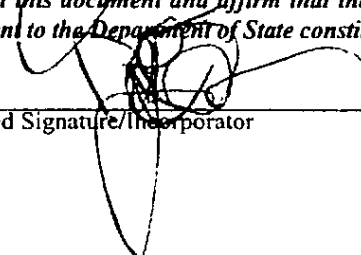


Required Signature/Registered Agent

4/24/22

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

4/24/22

Date

4/22/22 PM 6:57