

P220 0005 / 629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

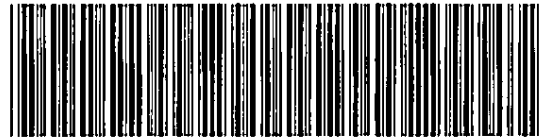
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400387894484

05/17/22--01008--017 **70.00

CLERK OF STATE
TALLAHASSEE, FLORIDA

2022 MAY 17 AM 5:08

FILED

COVER LETTER

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

SUBJECT: Signature Investment Partners, 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: Dan Jacobson
Name (Printed or typed)

901 S. Federal Hwy #201
Address

FT. Lauderdale, FL 33316
City, State & Zip

(954) 467-3191
Daytime Telephone number

dav@lexantitle.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: Signature Investment Partners, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

30 Dorris Road
Alpharetta, GA 30004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful business

FILED
2022 MAY 17 AM 5:08
SECRETARY OF STATE
TALLAHASSEE, FL 32302

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Janet Disney Phillips
President

Address: 30 Dorris Road
Alpharetta, GA 30004

Name and Title: James Harold Phillips

Address: VP/Secretary
30 Dorris Road
Alpharetta, GA 30004

Name and Title: _____ Name and Title: _____

Address: _____ 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: Daniel A. Jacobson
Address: 901 S. Federal Hwy #201
FT. Lauderdale, FL 33316

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Janet Disney Phillips
Address: 30 Dorris Road
Alpharetta, GA 30004

2022 MAY 17 AM 5:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

[Signature] _____ Date 4/22/2022
Required Signature/Registered Agent

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.

Janet Disney Phillips _____ Date 4/22/2022
Required Signature/Incorporator