

P24000037192

Florida Department of State  
Division of Corporations  
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RESUBMISSION

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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Garden St Augustine Inc**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

2024 JUN -3 PM 1:15

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**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: Garden St Augustine Inc**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

21 SPANISH STREET  
ST AUGUSTINE, FL 32084**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Any Legal and Lawful Purpose

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE IV SHARES**The number of shares of stock is: 1,500 at No Par Value**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: JEAN PIERRE KLIFA - President/Director Name and Title: \_\_\_\_\_Address 21 SPANISH STREET Address: \_\_\_\_\_ST AUGUSTINE, FL 32084 \_\_\_\_\_\_\_\_\_\_  
\_\_\_\_\_

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 AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	Harry M. Samuels
Address:	2901 Stirling Road, #308
	Ft. Lauderdale, FL 33312

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name:	JEAN PIERRE KLIFA
Address:	21 SPANISH STREET
	ST AUGUSTINE, FL 32084

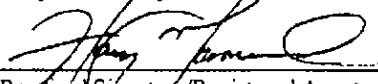
**ARTICLE VIII EFFECTIVE DATE:**

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:*

	May 28th, 2024
Required Signature/Registered Agent	Date
Harry M. Samuels	

*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.*

	May 28th, 2024
Required Signature/Incorporator	Date
JEAN PIERRE KLIFA	

2024  
May 28th, 2024  
11:15

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