

P25000000089

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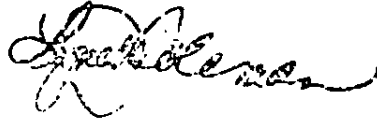
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE :

AUTHORIZATION :

COST LIMIT : \$ 70.0



2024 DEC 30 11 9:47

ORDER DATE : 12/30/24

ORDER TIME :

ORDER NO. :

CUSTOMER NO:

DOMESTIC FILING

NAME: Tradewinds Avenue GP Inc.

EFFECTIVE DATE:

- ☐ ARTICLES OF INCORPORATION
- ☐ CERTIFICATE OF LIMITED PARTNERSHIP
- ☐ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- ☐ CERTIFIED COPY
- ☒ PLAIN STAMPED COPY
- ☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON:

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: Tradewinds Avenue GP 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

2024 DEC 30 11:34:47

FROM: Dentons Cohen & Grigsby PC

Name (Printed or typed)

9110 Strada Place, Mercato Suite 6200

Address

Naples, FL 34108

City, State & Zip

Daytime Telephone number

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: Tradewinds Avenue GP Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1644 Vinland Way

Naples, Florida, 34105

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To act as Corporate General Partner of Limited Partnership; Residential Real Estate

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kevin King, Director, President

Name and Title: Justin Ladha, Director, Treasurer

Address: 1644 Vinland Way

Address: 202, 40 Aberdeen Avenue

Naples, Florida, 34105

St. John's, NL, A1A 5T3 Canada

Name and Title: Andrew Driscoll, Director, Secretary

Name and Title:

Address: 2 Ashkay Drive

Address:

Logy Bay, NL, A1K 0G6 Canada

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: Kevin King _____

Address: 1644 Vinland Way _____

Naples, Florida, 34105 _____

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Kevin King _____

Address: 1644 Vinland Way _____

Naples, Florida, 34105 _____

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: January 1, 2025. (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

/s/ Kevin King _____

Required Signature/Registered Agent

12/30/2024

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.

/s/ Kevin King _____

Required Signature/Incorporator

12/30/2024

Date