

P95000063795

FILED

95 AUG 18 PM 2 42

Rose Belanger
The Hummingbird Hotel, Inc.

631 Lucerne Avenue

Lake Worth, FL 33460

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

70000158887
-07/18/95--01031--001
****122.50 ****122.50

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

W95-14685
KMH 7-20-95

W95-13746

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

AS-12-48



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 10, 1995

ROSE BELANGER
631 LUCERNE AVE.
LAKE WORTH, FL 33460

SUBJECT: HUMMINGBIRD HOTEL, INC.
Ref. Number: W95000013746

We have received your document for HUMMINGBIRD HOTEL, INC.. However, the document has not been filed and is being returned for the following:

The corporate fees are as follows:

CORPORATIONS FILING FEES

Profit and NonProfit
Florida & Foreign Corp.

Filing Fees	\$35.
Registered Agent Designation	\$35.
Certified Copy	\$52.50
Total Fee Due	\$122.50

The designation of the registered agent must be at a Florida street address.

You must list at least one incorporator with a complete business street address.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6924.

Sharon Tala
Document Specialist Supervisor

Letter Number: 395A00033017



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 20, 1995

ROSE BELANGER
631 LUCERNE AVENUE
LAKE WORTH, FL 33460

SUBJECT: HUMMINGBIRD HOTEL, INC.
Ref. Number: W95000014685

We have received your document for HUMMINGBIRD HOTEL, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

You failed to make the correction(s) requested in our previous letter.

You must list at least one incorporator with a complete business street address.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6927.

Kathy Hyman
Document Specialist

Letter Number: 795A00034798

Articles of Incorporation
of
Hummingbird Hotel, Inc.

FILED
95 AUG 16 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Article I - Name: The name of the corporation shall be:

Hummingbird Hotel, Inc.

Article II - Principal Office: The principal place of business and mailing address of this corporation shall be:

631 Lucerne Avenue
Lake Worth, FL 33460

Article III - Capital Stock: The number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares.

Article IV - Initial Registered Agent and Street Address: The name and address of the initial registered agent is:

Rose Belanger
631 Lucerne Ave.
Lake Worth, FL 33460

Article V - Incorporator: The name and street address of the incorporator to these Articles of Incorporation is:

Rose Belanger
631 Lucerne Ave
Lake Worth, FL 33460

The undersigned incorporator has executed these Articles of Incorporation this 7 day of July, 1995.

Rose Belanger
Rose Belanger

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTRATION OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent, in the State of Florida.

1. The name of the corporation is:

Hummingbird Hotel, Inc.

2. The name and address of the registered agent and office is:

Rose Belanger
631 Lucerne Ave
Lake Worth, FL 33460

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE ABOVE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Rose Belanger
Rose Belanger

Dated July 7, 1995

FILED
95 AUG 16 PM 2:42
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000063795

1. Corporation Name

HUMMINGBIRD HOTEL, INC.

Principal Place of Business

631 LUCERNE AVENUE
LAKE WORTH FL 33460

Mailing Address

631 LUCERNE AVENUE
LAKE WORTH FL 33460



REINSTATEMENT 96ad

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/16/1995

5. FID Number

☒ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
1	ROSE A BELANGER	2955 MELALEUCA RD	LAKE WORTH FL 33460

300002000228--5
-11/08/96--01041--010
****375.00 ****375.00

8. Name and Address of Current Registered Agent

BELANGER, ROSE
631 LUCERNE AVENUE
LAKE WORTH FL 33460

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

State, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

RA Belanger
REGISTERED AGENT MUST SIGN

Date 9-16-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director of this receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed to the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RA Belanger

Date

Daytime Phone #

9-16-96 (407) 582-3234