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TRANSMITTAL LETTER
FILED

97 APR 22 PM 4: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-03/17/97--01086--019
****131.25 ****131.25

SUBJECT: CHESTERFIELD ADVISORY GROUP, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: JEFFREY E. MILSTEIN P.A., P.C.
Name (Printed or typed)

679 ITHACA PLACE
Address

EAST WINDSOR, N.J. 08520
City, State & Zip

609-448-2089

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 11, 1997

JEFFREY E. MILSTEIN P.A., P.C.
679 ITHACA PLACE
EAST WINDSOR, NJ 08520

SUBJECT: CHESTERFIELD ADVISORY GROUP, INC.
Ref. Number: W97000008438

4/15/97
SEE ENCLOSED
PLEASE EXPEDITE!
THANK YOU

We have received your document for CHESTERFIELD ADVISORY GROUP, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent designated must be an active Florida corporation or limited liability company or a foreign corporation or limited liability company authorized to transact business in Florida. Please correct the document accordingly.

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) 487-6915.

Pamela Hall
Document Specialist

Letter Nurnber: 397A00018290

ARTICLES OF INCORPORATION

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

STATE OF FLORIDA
TALLAHASSEE

ARTICLE I NAME

The name of the corporation shall be:

CHESTERFIELD ADVISORY GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

27 SADDLE BACK ROAD
TEQUESTA, FL. 33469

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JEFFREY E. MILSTEIN

27 Saddle Back Road

Tequesta, FL 33469

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

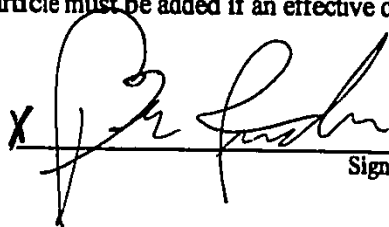
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

BEN GIORDANO
27 SADDLE BACK ROAD
TEQUESTA, FL. 33469

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

01 day of MARCH, 19 97.

(An additional article must be added if an effective date is requested.)

X 

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is CHESTERFIELD, ADVISORY GROUP, INC.

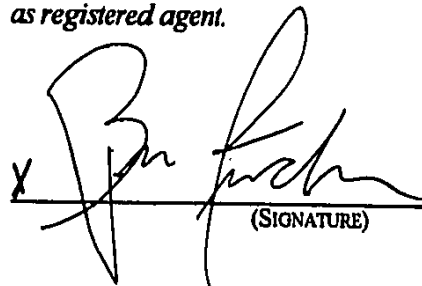
2. The name and address of the registered agent and office is:

JEFFREY E. MILSTEIN
(NAME)

27 SADDLE Back Road
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

Tequesta, FL 33469
(CITY/STATE/ZIP)

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 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 obligations of my position as registered agent.

x 
(SIGNATURE)

3-01-97
(DATE)