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

Enclosed is 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

Filing Fee

□ \$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: CATHY A. KELLOM	
Name (Printed or typed)	
1724 BRIGHT MADOU COURT	900003295235 -06/19/0001065- *******78.75 *****
ORLANDO, PL 32818 City, State & Zip	
401-896-1114 Daytime Telephone number	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
ARTICLE I NAME The name of the corporation shall be:	FIL SUCPETARY DIVISION OF C	ED Y OF STATE ORPORATIONS
CATHY A. KELLOM, INC.	00 JUN 19	PM I2: 27
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
1724 BRIGHT MEADOW CT ORLANDO, PL 32218	·	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
APPRAISAL SERUCES		
ARTICLE IV SHARES The number of shares of stock is:	·	
100		
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):		
ARTICLE VI REGISTERED AGENT The name and Florida street address registered agent is: CATHY A, KELLOM		
1/124 BRIGHT MANDOW CT		
ORLANDO, PL 32818		
The name and address of the Incorporator is: CATHY A, KELLOM 1N24 BRIGHT MEADOW CT ORLANDO, FL 30 818		
**************************************		*****
certificate, I am familiar with and accept the appointment as registered agent and agree	a corporation at the pl to act in this capacity	ace designated in this
Signature/Registered Agent	 Date	0
Signature/Incorporator	Date	00_