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Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
TALL ALL SEE TO FEE PA

CJ. 1-27

TRANSMITTAL LETTER

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

SUBJECT:CLIFF KOEKEARTY, INC.				
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	CUFFORD L Name (Address		
-	DEMINOCE City,	State & Zip) (
-	727- (244 Daytime Te	- 7209 elephone number		

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)
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: CIFF ROG REACTY THE TOTAL TO
ARTICLE II PRINCIPAL OFFICE
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 14104 88th Aug. No. 2000 Seminoce, F2 33776 ARTICLE III PURPOSE
ARTICLE III PURPOSE
The purpose for which the corporation is organized is: $40 \text{ A} \leq 4 \leq 4 \text{ A}$
The purpose for which the corporation is organized is: to ASSIST IN the Buying AND SCILING OF REAR GSTATE
ARTICLE IV SHARES
The number of shares of stock is: /
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
Cutto Ro Cutto Roll L. Roll, Broken Owner
14104 885 Ave. N.
SEMINOCE, FL 3377C
ARTICLE VI REGISTERED AGENT The state of th
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:
14/04 88th Ave N.
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
ELIFERN L/ROT
14,04 88th AR N.
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
1/21/1/4/
Signature/Registered Agent -//- US Date
Signature/Registered Agent Date
C/M/////

Date

Signature/Incorporator