

P20000094224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

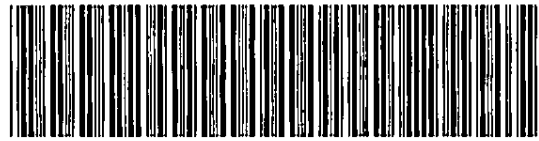
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/01/20--01032--024 ++70.00

20040-1 12/10/20

Derrick Thompson
12/10/2020

COVER LETTER

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

SUBJECT: Ashley Porter Real Estate P.A.
(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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Ashley Porter
Name (Printed or typed)
9163 Military Trail
Address
Navarre, FL 32566
City, State & Zip
850-777-4146
Daytime Telephone number
AnnMotley84@gmail.com
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: Ashley Porter Real Estate P.A.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>9163 Military Trail</u>	_____
<u>Navarre, FL 32566</u>	_____
_____	_____
_____	_____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____
For any legal business purposes with a focus on real estate

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Ashley Porter, President</u>	Name and Title: _____
Address <u>9163 Military Trail</u>	Address: _____
<u>Navarre, FL 32566</u>	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____

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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: Ashley Porter
 Address: 9163 Military Trail
Navarre, FL 32566

ARTICLE VII INCORPORATOR

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

Name: Ashley Porter
 Address: 9163 Military Trail
Navarre, FL 32566

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/02/2021 (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

Ashley Porter
 Required Signature/Registered Agent

10/26/2020
 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.

Ashley Porter
 Required Signature/Incorporator

10/26/2020
 Date