## NO9000009969

(1	Requestor's Name)	
(,	Address)	
(,	Address)	
(1	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
1)	Business Entity Name)	
· (I	Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions to Filing Officer:		



200159549182

08/17/09--01005--007 \*\*78.75

Office Use Only

W09000037311

1D-14-06

## **COVER LETTER**

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

Check on depo	set with your	Hice	
	_	ticles 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
		ADDITIONAL COPY REQUIRED	

FROM: William Schork
Name (Printed or typed)

524 Paul Morris Dr. Swita H
Address

Englewood, F1. 34223
City, State & Zip

941-475-1589
Daytime Telephone number

Complete air Service Q Yahoo. Com
E-mail address: (to be used for future annual report notification)

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



August 18, 2009

WILLIAM J. SCHORK 524 PAUL MORRIS DR SUITE H ENGLEWOOD, FL 34223

SUBJECT: KEYSTONE SQUARE CONDO CORP.

Ref. Number: W09000037311

We have received your document for KEYSTONE SQUARE CONDO CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

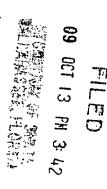
## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of 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 (850) 245-6869.

Christine Haney
OPS Clerk
New Filing Section

Letter Number: 909A00028032



ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

Reystone Square Condominium association, Inc
The principal street address and mailing address, if different is:  624 Paul Morris Dr. State H.  Evaplewood, Fl. 34223  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Personal Protection
ARTICLE IV MANNER OF ELECTION  The manner in which the directors are elected or appointed:
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS  List name(s), address(es) and specific title(s):  Bill Schork 524 Paul Morris Dr Sinte H. Pres.  Joe Whitmarsh 524 Paul Morris Dr. Sinte E Vice Pres.  John Maddens "" See.
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  WILLIAM Schork  524 Paul Morris Dr.  Englewood, F1-34223  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  William J Schork  524 PAUL MORRIS DR  ENGLEWOOD, FL 34223
Having been named as registered agent/to accept service of process for the above stated corporation at the place designated in this certificate, Jam/familiar with and accept the appointment as registered agent and agree to act in this capacity.    O   O
Signature/Incorporator Date