

(Re	questor's Name)	
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	y/State/Zip/Phone	e #)
(Bu	siness Entity Nam	ne)
(Dc	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	у



08/28/17--01002--015 \*\*70.00



M. MOON DCT 1 6 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 6, 2017

GAIL EMLAW 5001 SORRENTO CT. CAPE CORAL, FL 33904

SUBJECT: RESA GREATER FORT MYERS CHAPTER, INC. Ref. Number: W17000079587

We have received your document for RESA GREATER FORT MYERS CHAPTER, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 617.0202(d), Florida Statutes, requires the manner in which directors are elected or appointed be contained in the articles of incorporation or a statement that the method of election of directors is as stated in the bylaws.

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 (850) 245-6052.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 717A00020243

UCT 16 PH 12: 18

• .	In compliance with	OF INCORP		
<u>ARTICLE I</u>	<u>NAME</u> e corporation shall be:	Iyers Chapter, ING	2.	
	PRINCIPAL OFFICE			
	Principal street address:		Mailing address, if different is:	
5001	Sorrento Ct. Cape Coral, Florida 33904			
<del></del>				
ARTICLE III The purpose fo	<u>PURPOSE</u> or which the corporation is organized is:	rade association cl	hapter dedicated to advancing excellen	and
	m in real estate staging. The specific purpose			
support servic	es, and continuing education to professional	real estate stagers	···	<u>p;                                     </u>
ARTICLE IV	<u>MANNER OF ELECTION</u> The manner	r in which the dire		itial board was
	<u>MANNER OF ELECTION</u> The manner inted, future boards will be elected		ctors are elected and appointed:	itial board was
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Name and Title:	Nat	ne and Title	e:	•	 	
Address	Ad	dress:				
 Name and Title: Address	Nar Ad		e:		 	
The <u>name and Flo</u>	R <u>EGISTERED AGENT</u> prida street address (P.O. Box NOT acceptabl Gail Emlaw	c) of the reg	gistered		 	
	R <u>EGISTERED AGENT</u> prida street address (P.O. Box NOT acceptabl	c) of the reg	gistered			
The <u>name and Fk</u> Name:	R <u>EGISTERED AGENT</u> prida street address (P.O. Box NOT acceptabl Gail Emlaw		istered			
The <u>name and Fk</u> Name: Address: <u>ARTICLE VII</u>	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptabl Gail Emlaw 5001 Sorrento Ct.		zistered			
The <u>name and Fk</u> Name: Address: <u>ARTICLE VII</u> The <u>name and ad</u>	REGISTERED AGENT orida street address (P.O. Box NOT acceptabl Gail Emlaw 5001 Sorrento Ct. Cape Coral, FL. 33904 INCORPORATOR dress of the Incorporator is:		zistered			81:2111 01:02

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: . (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

Required Signature of Registered Agent

10/1/17

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.

Required Signature of Incorporator

10/1/17