

TRANSMITTAL LETTER

PolC00038121

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

SUBJECT: To EASTON Realty & Associates, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300003992453--2--  
-04/11/01-01089-013  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed is 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Josephine EASTON  
Name (Printed or typed)

409 Hayes Rd.  
Address

Lutz FLA. 33549  
City, State & Zip

813-962-1962  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 APR 11 AM 11:50

FILED

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

gy4/16

# 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:  
Jo Easton Realty & Associates, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
409 Hayes Rd. Lutz, Florida 33549

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Sales

## ARTICLE IV SHARES

The number of shares of stock is:  
250 (Two Hundred Fifty) Shares

## ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):  
President Josephine Easton 409 Hayes Rd. Lutz, Florida 33549

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:  
Josephine Easton 409 Hayes Rd. Lutz, Florida 33549

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Josephine Easton 409 Hayes Rd. Lutz, Florida 33549

.....  
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.

Josephine Easton  
Signature/Registered Agent

4-9-01  
Date

Josephine Easton  
Signature/Incorporator

4-9-01  
Date

FILED  
01 APR 11 AM 11:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA