

TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 JUL -1 PM 3:18

P02000073097

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

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-07/01/02--01071--026
*****87.50 *****87.50

SUBJECT:

F.R.O.G. Realty, Inc.
(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:

Christie Zimmer
Name (Printed or typed)

P.O. Box 2144
Address

Land O' Lakes Fla 34639
City, State & Zip

813-929-0345
Daytime Telephone 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)

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ARTICLE I NAME

The name of the corporation shall be:

F.R.O.G. Realty, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 2144
Land O' Lakes, Fla 34639

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Brokerage and any other business
legally conducted in the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

7500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Christie Zimmer, Director
P.O. Box 2144
Land O' Lakes, Fla 34639

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

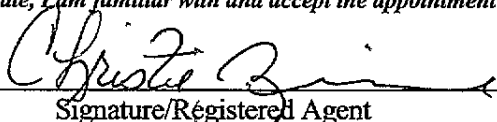
Christie Zimmer
3615 Pinecone Ct.
Land O' Lakes, Fla 34639

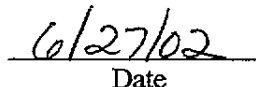
ARTICLE VII INCORPORATOR

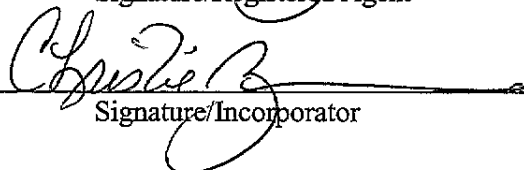
The name and address of the Incorporator is:

Christie Zimmer
P.O. Box 2144
Land O' Lakes, Fla 34639

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


Signature/Registered Agent


Date


Signature/Incorporator


Date