

TRANSMITTAL LETTER

PA2000103303

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

SUBJECT: DESTIN CASTLES REALTY INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300007947243--4

-09/23/02--01059--003

*****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

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: COSTEL G. SERBAN
Name (Printed or typed)

24 E. CASA LOMA DR
Address

MARY ESTHER FL 32569
City, State & Zip

(850) 585-9574 (800) 559-2392
Daytime Telephone number

FILED
02 SEP 23 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

136
9/25

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: DESTIN CASTLES REALTY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 24 E. CASA LOMA DR.
MARY ESTHER FL. 32569

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO OPERATE AND CONDUCT
ALL REAL ESTATE TRANSACTIONS.

ARTICLE IV SHARES CUMULATIVE VOTING OF SHARES OF STOCK IS NOT AUTHORIZED.
The number of shares of stock is: THE AGGREGATE NUMBER OF SHARES WHICH THE
CORPORATION SHALL HAVE AUTHORITY TO ISSUE IS (\$14,000) OF SHARES
OF COMMON STOCK HAVING A PAR VALUE OF \$0.50 EACH.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

COSTEL G. SERBAN
24 E. CASA LOMA DR.
MARY ESTHER FL. 32569

ARTICLE VI REGISTERED AGENT

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

COSTEL G. SERBAN (TEL: (850) 585-9574
24 E. CASA LOMA DR. (800) 559-2392
MARY ESTHER FL. 32569

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

COSTEL G. SERBAN
24 E. CASA LOMA DR.
MARY ESTHER FL. 32569

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Sep 19/02

Sep 19/02