

P03000016886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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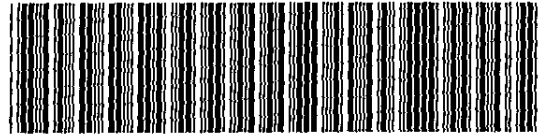
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: PROFESSIONAL APPRAISAL SERVICES OF SOUTHWEST FLORIDA, 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: DENNIS ALLISON
Name (Printed or typed)
12561 NEW BRITTANY BLVD.
Address
FORT MYERS FL 33907
City, State & Zip
239-286-4085
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)

ARTICLE I NAME

The name of the corporation shall be:

PROFESSIONAL APPRAISAL SERVICES OF SOUTHWEST
FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12561 NEW BRITTANY BLVD.
FORT MYERS, FL 33907

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE APPRAISAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

DENNIS ALLISON, OWNER + CEO
12561 NEW BRITTANY BOULEVARD
FORT MYERS, FL 33907

ARTICLE VI REGISTERED AGENT

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

DENNIS ALLISON
12561 NEW BRITTANY BLVD.
FORT MYERS, FL 33907

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DENNIS ALLISON
12561 NEW BRITTANY BLVD
FORT MYERS, FL 33907

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

Signature/Incorporator

Date

Date

03 FEB -4 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED