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(Re	questor's Name)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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TRANSMITTAL LETTER

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

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Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	DIMITRI SCH Name	WARZ (Printed or typed)	
. , ,	2249 Kathe	hive St.	
	Fort Myors City,	FL 33901 State & Zip	
	239 - 20 Daytime T	16-7136	····

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 1, 2003

DIMITRI SCHWARZ 2249 KATHERINE ST FT MYERS, FL 33901

SUBJECT: SCHWARZ INTERNATIONAL REALTY, INC.

Ref. Number: W03000028237

We have received your document for SCHWARZ INTERNATIONAL REALTY, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of 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) 245-6884.

Letter Number: 203A00054056

Shawn Logan Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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:	
SCHWARZ INTERNATIONAL REALTY INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
2249 KATHERINE ST.	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
REAL ESTATE	
ARTICLE IV SHARES The number of shares of stock is:	03 66
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	EILED 40
List name(s), address(es) and specific title(s): DIMITEL SCHWARZ	
	2: 40
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> of the registered agent is:	
2249 Katherine St.	
FORT MYERS, FL 33901	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
DIMITRI SCHWARZ 2249 KATHERINE ST	
FORT MYERS, FL 33901	
***************	*******
Having been named as registered agent to accept service of process for the above stated corpo- certificate, I am familiar with and accept the appointment as registered agent and agree to act in	
	. ,
Signature/Registered Agent	Date
Diniti School Signature/Incorporator/REGISTERED AGENT	09.23.03