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Requestor's Name)
3650 Sedona Loop
((da. ess)
(Address)
, ,
Tall. Fl. 32308 686-7157 (City/State/Zip/Phone #)
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PICK-UP WAIT MAIL Rin Lovell, realty, FW ((Business Entity Name)
Kim Lovell Pealer JAI
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE
TALLAHA SEE FLORIDA

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: KIM LOVELL, REALTOR, INC.

SECRETARY OF STATE
TALLAHASSEF, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3924 INDIAN TRAIL

DESTIN, FLORIDA 32541

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200 SHARES PAR VALUE OF \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: KIM LOVELL, 3924 INDIAN TRAIL, DESTIN, FLORIDA 32541

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

R. J. MONTI

3924 INDIAN TRAIL

DESTIN, FLORIDA 32541

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 2004
(An additional article must be added if an effective date is requested.)
RJ. Monti
Signature
Signature
Signature

Notarization is not required

Note: affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: KIM LOVELL, REALTOR, INC.
- 2. The name and address of the registered agent and office is:

(Name) KIM LOVELL

(P.O.Box or Mail Drop Box NOT acceptable)

3924 INDIAN TRAIL

(City/State/Zip)
DESTIN, FLORIDA 32541

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)

(date)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

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