

P04000116833

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(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

98/11

## TRANSMITTAL LETTER

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

SUBJECT: Equity Real Estate Services, 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: Barbara O'Donnell  
Name (Printed or typed)

13000 Mullins Lane  
Address

Fort Myers, FL 33913  
City, State & Zip

239-940-3041  
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:

Equity Real Estate Services, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6361 Presidential Ct.  
Ft Myers, Fl 33919

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Providing real estate services to investors.

### **ARTICLE IV SHARES**

The number of shares of stock is:

100

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Barbara O'Donnell  
13060 Mullins Lane  
Ft Myers, Fl 33913

### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Barbara O'Donnell  
6361 Presidential Ct.  
Ft Myers, Fl 33919

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Barbara O'Donnell  
6361 Presidential Ct.  
Ft Myers, Fl 33919

\*\*\*\*\*

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

08/06/04  
Date

  
\_\_\_\_\_  
Signature/Incorporator

08/06/04  
Date

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