(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(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:	(PROPOSED CORPORA	Homefinders	Kealtu	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	i a check for:	
<b>V</b>	D ***			
<b>□</b> \$70.00	□ \$78.75	□ \$78.75	□ \$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	& Certificate of Status	a commed copy	& Certificate of	
			Status	
		ADDITIONAL CO	PY REQUIRED	
		<u></u>		
	,			
		1 6	. 4.4	
FROM:	Jacke L. Bennett Name (Printed or typed)			
	3072 Y	? fulme a	Cr	
3072 N Fulner C				
	TALLAHASSEE Fl. 32303 City, State & Zip			
City, State & Zip				
	$\nabla$	584483	<b>C</b> /	
	<i>X.</i> X	ひりしみ カスく	$\boldsymbol{\vee}$	

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

Daytime Telephone number



•	A <b>NU</b> FILED
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	05 APR 29 AM 8: 23
	SECKLIARY OF STATE TALLAHASSEE, FLORIDA
The name of the corporation shall be: PROFESSIONAL	Homefinders' Realty,
ARTICLE II PRINCIPAL OFFICE	-4
The principal place of business/mailing address is: 3672 0 f	ulmer archa
Inlinhas	see fla 32303
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: Sel	I Real Estate
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Lickie L. Bennett 3072 of fulmer a  Lines R. Bennett II "  Lorrell R. Bennett II "	e Talla F1 03 president  ' ' Vice president  ' Treasurer
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the 1 Jackie L. Bennett 3072 M. Fulmer Circle TAllAhassee, fla. 32303	registered agent is:
The name and address of the Incorporator is: Sacke L. Ber 3072 n fuln Tallahasse	nnett ner Cir e, fla 32303
**************************************	**************************************
certificate, I am familiar with and accept the appointment as registered agent and agree	to act in this capacity
Signature/Registered Agent	4/29/05
1 Diginistra Tografica Agoin	Date

Signature/Incorporator