

P05000071041

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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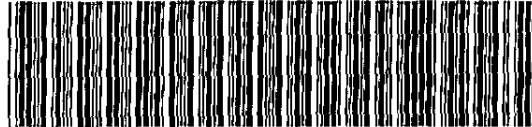
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

05 MAY 16 AM 11:05

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BWK

W05-22898

## TRANSMITTAL LETTER

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

**SUBJECT:** SCHMIDT ENTERPRISES 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: DEBRA L. SCHMIDT

Name (Printed or typed)

11840 69TH WAY N

---

Address

LARGO FL 33773

City, State &amp; Zip

727-543-6184

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 5, 2005

DEBRA L. SCHMIDT

~~11840 69TH WAY N~~ 11491 - 93<sup>rd</sup> St.  
LARGO, FL 33773

SUBJECT: ~~SCHMIDT ENTERPRISES INC.~~ Schmidt Team, Inc.  
Ref. Number: W05000022898

We have received your document for SCHMIDT ENTERPRISES INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is P03000069811 SCHMIDT ENTERPRISES, INC.

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) 245-6840.

Bruce W Kitchens  
Document Specialist  
New Filings Section

Letter Number: 405A00032320

## 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:

~~SCHMIDT ENTERPRISES INC.~~ Schmidt Team Inc.

FILED

05 MAY 16 AM 11:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

~~11840 69TH WAY N~~ 11491-93<sup>rd</sup> St.  
LARGO FL 33773

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE & MORTGAGE SERVICES

### ARTICLE IV SHARES

The number of shares of stock is:

500 SHARES

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DEBRA L. SCHMIDT  
PRESIDENT

~~11840 69TH WAY N~~ 11491-93<sup>rd</sup> St.  
LARGO FL 33773

### ARTICLE VI REGISTERED AGENT

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

DEBRA L. SCHMIDT

~~11840 69TH WAY N~~ 11491-93<sup>rd</sup> St.  
LARGO FL 33773

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DEBRA L. SCHMIDT

~~11840 69TH WAY N~~ 11491-93<sup>rd</sup> St.  
LARGO FL 33773

\*\*\*\*\*

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

+ Debra L. Schmidt

Signature/Registered Agent

+ 4-27-05

Date

+ Debra L. Schmidt

Signature/Incorporator

+ 4-27-05

Date