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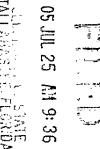
(Requestor's Name)	
(Address)	8000572889
(Address)	00000.2000
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	07/15/0501021011
(Business Entity Name)	
(Document Number)	WITW.
Certified Copies Certificates of Status	ALLABASISE A
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7/26/05 BWK W05-33982

TRANSMITTAL LETTER

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

SUBJECT: K	IGHT TIME (PROPOSED CORPORA	APPRAISAL	5, FNC
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	DESUITA)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:		E. COLS A (Printed or typed)	
-	HOLIDAY	ASANT HIU Address FL 34691 State & Zip	- LANE

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 15, 2005

GABRIELE E. COLSANT 2329 PLEASANT HILL LN HOLIDAY, FL 34691

SUBJECT: RIGHT TIME APPRAISALS, INC.

Ref. Number: W05000033982

We have received your document for RIGHT TIME APPRAISALS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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: 105A00046778

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621 F.S. (Profit)		
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
ARTICLE I NAME The name of the corporation shall be: RIGHT TIME APPRAISALS	, FNC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2329 PLEASANT HI HOLIDAY, 7L 346		
ARTICLE III PURPOSE The purpose for which the corporation is organized is: APPRAISALS - REA	L ESTATE	
ARTICLE IV SHARES The number of shares of stock is:	1 25 A	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): GABRIELE E. COLSANT PRESIDEN 2329 PLEASANT HULL CANE		
List name(s), address(es) and specific title(s): (ABRIELE E. COLSADT	PRESIDEN	
2329 PLEASANT HULL	CANE	
HOLIDAY, 7L 34691		
ARTICLE VI REGISTERED AGENT		
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:		
GABRIELE E. COLSA		
2329 PLEASANT HIL	L CALNE	
ARTICLE VII INCORPORATOR HOLIDAY, 7L 3469	(
The <u>name and address</u> of the Incorporator is: Gabriele & Colsant		
2329 Pleasant Hill Lan	هـ	
++++++++++++++++++++++++++++++++++++++		
•	******	
Having been named as registered agent to accept service of process for the above stated corporation at the pla certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	ce designated in this	
$MA \cdot A \subset CA$		
Signature/Registered Agent Date	05	
Tolerik E. Colsant 7-21-1	n <i>S</i>	
Signature/Incorporator Date		