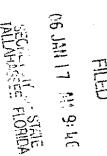
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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			



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# TRANSMITTAL LETTER

Department of State			
Division of Corporat	iions	* · · · · · · · · · · · · · · · · · · ·	
P. O. Box 6327		·	
Tallahassee, FL 323	14		
Channa	Inida Baaltu Ina		
SUBJECT: Channe	(PROPOSED CORPOR	TE NAME - MUST INCL	une suesist
	(I NOI OGED COID OIL	TENAME - MOST INCL	CDE SOTTIA)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	i a check for:
Eliciosed are all orig	mar and one (1) copy of the art	icles of incorporation and	i 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
		ADDITIONAL CO	Status DPY REQUIRED
		<del></del>	
FROM: Mic	hael Eggers		
FROM:	Name	e (Printed or typed)	
	7801 Sylvan Dr.		
•		Address	
1	Hudson, Fl. 34467		
-	City	, State & Zip	

727-938-9719

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

Daytime Telephone number

FILED

#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

06 JAN 17 AM 9: 46

## ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Channelside Realty, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 7801 Sylvan Dr. Hudson, Fl. 34467

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real estate brokerage

#### 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):

Michael Eggers, President, Treasurer, and Secretary 7801 Sylvan Dr. Hudson, Fl. 34467

#### ARTICLE VI REGISTERED AGENT

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

Michael Eggers 7801 Sylvan Dr. Hudson, Fl. 34467

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Eggers 7801 Sylvan Dr. Hudson, Fl. 34467

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 Date

| 1/6/06 |
| Signature/Incorporator Date