PO6000/37593

(Re	questor's Name)			
(Ad	dress)			
———(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
MYS Shoemaker CAVE AUTHORIZATION BY PHONE TO CORRECT_TE UT				
DOC. EXAM_	NA NOP			

Office Use Only



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SECRETARY OF STAIL BUTTON OF CORPORATION

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COVER LETTER

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

SUBJECT: Signature Consulting Realty, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	x \$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	<u>Lillous A. Shoemaker</u> Name	(Printed or typed)		
Post Office Box 485 Address				
Bay Springs, MS 39422 City, State & Zip				
(601) 764-3404 or (601) 764-3560 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)

生にとし SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

06 OCT 30 PM 3: 51

Signature Consulting Realty, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1016 Airport Rd. Suite 3

Post Office Box 6066 Miramar Beach, FL 32550

Destin,FL 32541

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Perform Real Estate Services

ARTICLE IV SHARES

The number of shares of stock is:

100

INITIAL OFFICERS AND/OR DIRECTORS

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

Melissa L. McDonald 1209 Airport Rd, Suite 9 Destin, FL 32541 President

ARTICLE VI REGISTERED AGENT

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

1016 Airport Rd.

Lillous A. Shoemaker ---

Suite 3

Destin, FL 32541

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lillous A. Shoemaker Post Office Box 485 Bay Springs, MS 39422

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

10 - 23 - 2006 Date 10 - 23 - 2006

Signature/Incorporator