

P08000025719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

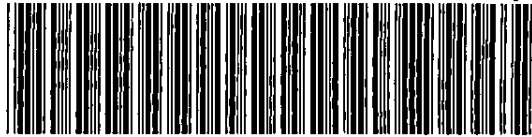
Special Instructions to Filing Officer:

Carol Bravelin GAVE
 AUTHORIZATION BY PHONE TO
 CORRECT Corp. Purpose
 DATE 3/11/08
 DOC. EXAM: cf

Office Use Only

691

W08-10774



500118904025

02/28/08--01035--015 **87.50

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 08 MAR 10 PM 3:42

cf 3/11/08

COVER LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAR 10 PM 3:42

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

SUBJECT: Carol Gravelin, P.A.

(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: Carol Gravelin

Name (Printed or typed)

5543 Baroque Dr

Address

Holiday FL 34690

City, State & Zip

727-234-0950

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAR 10 PM 3:42

February 29, 2008

CAROL GRAVELIN
5543 BAROQUE DRIVE,
HOLIDAY, FL 34690

SUBJECT: CAROL GRAVELIN, PA
Ref..Number: W08000010774

We have received your document for CAROL GRAVELIN, PA and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the corrected 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) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 408A00012845

RECEIVED
08 MAR 10 AM 8:00
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAR 10 PM 3:42

ARTICLE I NAME

The name of the corporation shall be:

Carol Gravelin, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:
5543 Baroque Dr
Holiday, FL 34690

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REALTOR/REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 700

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CAROL GRAVELIN
5543 BAROQUE DR
HOLIDAY, FL 34690

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
MARCH 10 2010
10:00 AM

ARTICLE VI REGISTERED AGENT

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

CAROL GRAVELIN
5543 BAROQUE DR.
HOLIDAY, FL 34690

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

CAROL GRAVELIN
5543 BAROQUE DR
HOLIDAY, FL 34690

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

02/26/2008
Date



Signature/Incorporator

2/26/2008
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAR 10 PM 3:42