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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

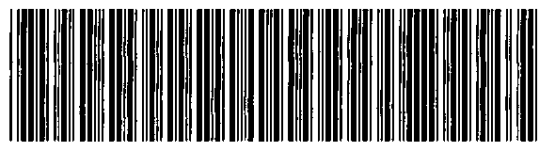
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2009 JAN 16 P 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

68-18-1
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COVER LETTER

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

SUBJECT: 101 Appraisals, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Annika Maria Weaver

Name (Printed or typed)

217 South Shadow Bay Drive

Address

Orlando, FL 32825

City, State & Zip

407-701-5505

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)

ARTICLE I NAME

The name of the corporation shall be:

101 Appraisals, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

217 South Shadow Bay Drive

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To perform real estate appraisals

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Annika Weaver, 217 South Shadow Bay Drive, Orlando, FL 32825, Owner

ARTICLE VI REGISTERED AGENT

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

Annika Weaver, 217 South Shadow Bay Dr., Orlando, FL 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Annika Weaver, 217 South Shadow Bay Dr., Orlando, FL 32825

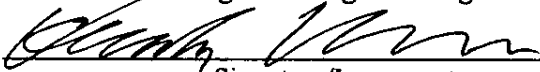
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1/14/2009

Date



Signature/Incorporator

1/14/2009

Date

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TALLAHASSEE, FLORIDA