

P09000066517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

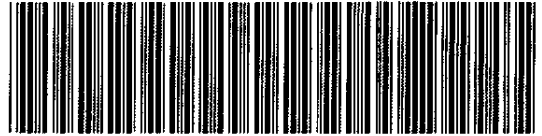
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W09-34739



200158940152

07/29/09--01016--009 **78.75

FILED
09 AUG -6 PM 2:34
TALLAHASSEE, FL 32301

neh
8-6-09



RECEIVED
DEPARTMENT OF STATE

FLORIDA DEPARTMENT OF STATE 09 AUG -6 AM 11:27
Division of Corporations

July 30, 2009

HOMeward REALTY REFERRALS INC.
203 W. PLATT STREET
TAMPA, FL 33606

SUBJECT: HOMeward REALTY REFERRALS INC
Ref. Number: W09000034739

We have received your document for HOMeward REALTY REFERRALS 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):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney
OPS Clerk

Letter Number: 409A00026201

*thank you for your response - I have
filled in the address per your request -
FYI I did not fill in on initial request
since the form states "if different."*

Thanks for your prompt attention
John Montano

COVER LETTER

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

SUBJECT: Homeward Realty Referrals 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: Homeward Realty Referrals Inc.
Name (Printed or typed)

203 W. Platt Street
Address

Tampa, FL 33606
City, State & Zip

813-441-0400
Daytime Telephone number

admin@homewardre.com
E-mail address: (to be used for future annual report notification)

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: Homeward Realty Referrals Inc

ARTICLE II PRINCIPAL OFFICE

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

203 W. PLATT ST
TAMPA FL 33606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business of Real Estate Referrals

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John Montesano, President
445 12th Street Unit 703
Tampa Florida 33602

ARTICLE VI REGISTERED AGENT

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

John Montesano, President
445 12th Street Unit 703
Tampa Florida 33602

ARTICLE VII INCORPORATOR

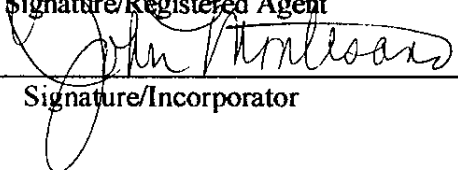
The name and address of the Incorporator is:

John Montesano, President
445 12th Street Unit 703
Tampa, Florida 33602

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



Signature/Incorporator

FILED
09 AUG - 6 PM 2:34
TAMPA FLORIDA

7-24-09

Date

7-24-09

Date