

PO9000070438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

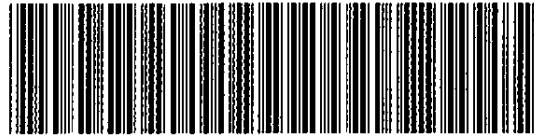
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/05/09--01028--001 **35.00

08/05/09--01028--002 **35.00

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2009 AUG 20 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

601-35674
L91
J. G. HARRIS AUG 21 2009

COVER LETTER

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

SUBJECT: Florida Asset Rehab, 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: Melissa Davis & Robin McGill
Name (Printed or typed)

7704 Dragon Fly Loop
Address

Gibson, FL 33534
City, State & Zip

813-402-6619
Daytime Telephone number

mdavis@reomaintenance-fl.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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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: Florida Asset Rehab, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 7704 Dragon Fly Loop
Gibson, FL 33534

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: New Business

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):
Melissa Davis Partner
Robin McGill Partner

ARTICLE VI REGISTERED AGENT

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

Melissa Davis
7704 Dragon Fly Loop
Gibson, FL 33534

ARTICLE VII INCORPORATOR

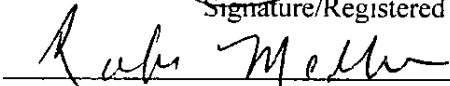
The name and address of the Incorporator is:

Robin McGill
5633 62nd Way N
St Petersburg, FL 33707

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

8/3/09

Date

8/3/09

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA