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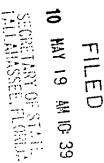
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# **COVER LETTER**

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

SUBJECT:	SEA WINDS REFERRAL SERVICES INC.				
_ <del></del>	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )				
Enclosed are an original	inal and one (1) copy of the arti	cles 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:		(Printed or typed)			
808 S.E. 46th Lane Address					
	Cape Coral, FL. City,		· · · · · · · · · · · · · · · · · · ·		
	239-542-2010 Daytime To	elephone number			
	SeaWindsFL@aol.co	om I for future annual report in	otification)		

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:

SEA WINDS REFERRAL SERVICES INC.

#### ARTICLE II PRINCIPAL OFFICE

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

808 S.E. 46th Lane, Cape Coral, FL. 33904

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Brokerage Referral Services

## 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):

Don Heisler, 4021 S.E. 19th Place, #204, Cape Coral, Fl. 33904

#### ARTICLE VI REGISTERED AGENT

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

Don Heisler, 4021 S.E. 19th Place, #204, Cape Coral, FL. 33904

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Don Heisler, 4021 S.E. 19th Place, #204, Cape Coral, FL. 33904

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

ignature/Registered Agent

Signature/Incorporator

Date

Ďate

FILED SECRETARY OF STATE

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