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| (Requestor's Name)                      |                   |             |  |  |
|---|-------------------|-------------|--|--|
| (Address)                               |                   |             |  |  |
| (Address)                               |                   |             |  |  |
| (City                                   | //State/Zip/Phon  | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL        |  |  |
| (Bus                                    | siness Entity Nar | me)         |  |  |
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| Certified Copies                        | Certificate:      | s of Status |  |  |
| Special Instructions to Filing Officer: |                   |             |  |  |
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TALLAHASSES TI SATE

J. Shivers NOV 15 2019

## **COVER LETTER**

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

| SUBJECT: AMERIWORLD REALTY, INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SI   | UFFIX)   |
|--|--|
| Filing Fee Filing Fee & Certificate of Status Filing Fee & Certified Copy Ce   | 7.50<br>ling Fee,<br>ertified Copy<br>Certificate of<br>atus |
| FROM: MIKO P. GUNDERSON  Name (Printed or typed)  18401 MURDOCK CIRCLE, UNIT C.                                      | ZOIO NOV 10  TALLAHASSE                                      |
| Address  PORT CHARLOTTE, FL 33948  City, State & Zip  941-627-1000   | 10 PH 3: 00  RY OF THATE                                     |
| Daytime Telephone number  MGUNDERSON@BIGWLAW.COM  E-mail address: (to be used for future annual report notification) | ation)   |

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)

| The name of the  | AMERIWORLD RE  | EALTY, INC.   |
|------------------|--|---|
|                  | •  |   |
| ARTICLE II       | PRINCIPAL OFFICE Principal street address                            | Mailing address, if different is:                                   |
|                  | 1225 S. McCALL ROAD  | 4001 SANTA BARBARA BLVD #345  |
|                  | ENGLEWOOD, FL 34223  | NAPLES, FL 34104  |
|                  |  |   |
|                  | PURPOSE  |   |
|                  | r which the corporation is organized is: . BUSINESS UNDER FLORIDA LA | NW.   |
| ARTICLE IV       |  |   |
| The number of s  | shares of stock is: 500  |   |
|                  | INITIAL OFFICERS AND/OR DIRE   |   |
|                  | Title: GAVONNIE T. ANDERSON -  | D Name and Title:   |
| Address:         | 2081 DORIA STREET  | Address:  |
|                  | PORT CHARLOTTE, FL. 3398   |   |
| Name and         | Title:   | Name and Title:   |
| Address:         |  | Address:  |
|                  |  |   |
| Name and         | Title:   | Name and Title:   |
| Address:         |  | Address:  |
|                  |  |   |
| ADTICLE IT       |  | 7 2   |
|                  | REGISTERED AGENT Florida street address (P.O. Box NOT accepts        | able) of the registered agent is:                                   |
| Name:            | MIKO P. GUNDERSON, ESC   |   |
| Address:         | 18401 MURDOCK CIRCLE   | UNIT.C.   |
|                  | PORT CHARLOTTE, EL 33  |   |
| ARTICLE VII      | INCORPORATOR   | S R fr  |
|                  | address of the Incorporator is:                                      |   |
| Name:            | MIKO P. GUNDERSON, ESC   |   |
| Address:         | 18401 MURDOCK CIRCLE, U<br>PORT CHARLOTTE, FL 33                     | INIT C.   |
| Havingsbeen n    | uned as registered agent to accept service of                        | process for the above stated corporation at the place designated in |
| his corrificate) | am familiar with and accept the appointment                          | as registered agent and agree to act in this capacity               |
| 11/1/10          | O Allen  | 11/9/10   |
| 100-0-           | Required Signature/Registered Age                                    |   |
| Suhmit Aic A     | - // . // //   | rin are true. I am aware that the false information submitted in a  |
|                  | pepartment of State constitutes a third degree                       |   |
| 11/1             | No 1. A. Visso   |   |
| 100              | w I function   | 11/9/10 Date  |
| •                | Required Signature/Incorporator                                      | Date  |