P11000021576

(Requestor's Name)				
(Address)				
(Address)				
(City	y/State/Zip/Phone	÷#)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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WI-5789

2011 BAR -1 PH 4: 41

T Burch MAR ... 2.2811

COVER LETTER

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

SUBJECT: Coldwell Banker Dayto	na Inc.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	eles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate o Status ADDITIONAL COPY REQUIRED
	÷
FROM: Robert Del Rose Name	(Printed or typed)
•	Santa Carlos Santa Anna Carlos
<u>Flagler Ave.</u>	ddress
New Smyrna Beach, Fl	State & Zip
386-426-6332	
Daytime To	elephone number
bob@surfcoastrealty.con E-mail address: (to be used] for future annual report notification)
•	iginal and one copy of the articles.



J. THOMAS CARDWELL COMMISSIONER

STREET ADDRESS: 101 East Gaines Street, Suite 636 • PHONE (850) 410-9800 • FAX (850) 410-9548 MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, FL 32399-0371 Visit us on the web: www.FLOFR.com • Toll Free: (800) 848-3792

February 15, 2011

Mr. Robert Del Rose 366 Flagler Avenue New Smyrna Beach, FL 32169

Re: Coldwell Banker Daytona, Inc.

Dear Mr. Del Rose:

Thank you for your recent letter/fax requesting approval for use of the above-referenced name.

It is the opinion of this Office that the above-referenced corporate name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Linda B. Charity

Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations, Department of State



January 31, 2011

ROBERT DEL ROSE 366 FLAGLER AVE NEW SMYRNA BEACH, FL 32169

SUBJECT: COLDWELL BANKER DAYTONA INC

Ref. Number: W11000005789

We have received your document for COLDWELL BANKER DAYTONA 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):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 511A00002545

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I

NAME

ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		ddress, if different is:
	366 Flagler Ave.		antic Ave. Suite C
Т	New Smyrna Beach, Fl. 32169	DAytona Beach	Shores, Fl. 32118
ARTICLE III	DIIDDOCF		28 2
	which the corporation is organized is:		The second second
	Sales and Rentals	•	₹ n
riodi Zolalo			
ARTICLE IV	SHARES		14 4 0k0)
	res of stock is:100		Dai 4
	INITIAL OFFICERS AND/OR DIRECTOR		
	itle:Robert Del Rose President		
Address:	366 Flagler Ave. New Smyrna Beach, Fl. 32169		
	New Sinyma Beach, Ft. 32 to9	•	
•		- "	
	itle: Emory Donalson	Name and Title:	
Address:	3174 South Atlantic Ave. Suite C	Address:	
	DAytona Beach Shores, Fl. 32118		· · · · ·
15		N	
Name and 1 Address:	itle:		
Auuros.			
		•	
ARTICLE VI	REGISTERED AGENT	4	
ine <u>name and FR</u> Name:	orida street address (P.O. Box NOT acceptable) of Robert Del Rose		
Address:	366 Flagler Ave	•	
11001001	New Smyrna Beach, Fl. 32169	-	
	•	•	
	INCORPORATOR		
	dress of the Incorporator is:		
Name:	Robert Del Rose	=	
Address:	366 Flagler Ave.	•	
	New Smyrna Beach, Fl. 32169	-	
Having been nam	ned as registered agent to accept service of process	for the above stated corp	oration at the place designated
his certificate, I a	m familiar with and accept the appointment as reg	istered agent and agree to d	act in this capacity
(<)	ST VV V		01/21/2011
	Required Signature/Registered Agent		Date
l submit this doc	ument and affirm that the facts stated herein are	true. I am aware that the	false information submitted in
document to the L	Department of State constitutes a third degree felong	as provided for in s.817.1	55, F.S.
	\sim 0 Ω		
. XS &	NXK		01/21/2011
	Required Signature/Incorporator		Date