

P11000031210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

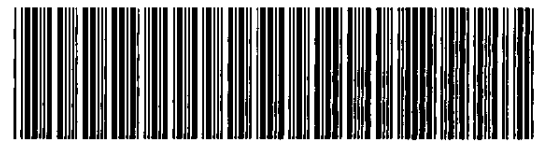
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: The Closer, 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 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: Leanne Shaw
Name (Printed or typed)

10454 Wiscane Avenue
Address

Orlando, FL 32836
City, State & Zip

407-766-9217
Daytime Telephone number

LeeShaw1@gmail.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 Closer, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address: 10454 Wiscane Avenue
Orlando, FL 32836
Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Real Estate Transactions - Closing For Clients - Notary Services - Real Estate Closings for Realtors and Individuals for a profit

ARTICLE IV SHARES
The number of shares of stock is: 1 share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: Leanne Shaw President - CEO
Address: 10454 Wiscane Avenue
Orlando, FL 32826
Name and Title: _____
Address: _____
Name and Title: _____
Address: _____
Name and Title: _____
Address: _____
Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Leanne Shaw
Address: 10454 Wiscane Avenue
Orlando, FL 32836

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Leanne Shaw
Address: 10454 Wiscane Avenue
Orlando, FL 32836

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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

Leanne B Shaw Required Signature/Registered Agent
Date: 3-24-11

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Leanne B Shaw Required Signature/Incorporator
Date: 3-24-11