

PI/0000035273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

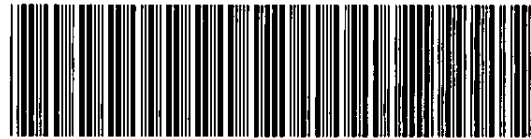
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2011 APR -8 PM 3:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SC  
4-8-11

## COVER LETTER

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

SUBJECT: Prime Star Realty 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: Ava Longworth

Name (Printed or typed)

5750 lonesome Dove lane

Address

Grant Florida 32949

City, State & Zip

321-733-1916

Daytime Telephone number

ava@primestar.net

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

prime star realty inc  
The name of the corporation shall be:

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
Ava Longworth  
5750 lonesome dove lane  
grant Florida 32949

Mailing address, if different is:

same

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
new business /real estate

## ARTICLE IV SHARES

The number of shares of stock is:100.

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ava Longworth president  
Address: 5750 lonesome dove lane  
grant Florida 32949

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: Ava Longworth  
Address: 5750 lonesome dove lane  
Grant Florida 32949


## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ava Longworth  
Address: 5750 lonesome dove lane  
Grant FL 32949

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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

  
Required Signature/Registered Agent

04/05/2011  
Date

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.

  
Required Signature/Incorporator

04/05/2011  
Date