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(Re	questor's Name)	
(Ad	dress)	
, (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE
ALLAHASSEE FLORID

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COVER LETTER

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

SUBJECT: BANK PLUS REALTY	INC.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation an	d a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
the desired the table species	La Maria Maria de Carlos	+ संवास्त्राम् । जन्
FROM: BANK PLUS REALTY IN	C. (Printed or typed)	
3064 SANTA MARGARI	TA ROAD Address	
WEST PALM BEACH F	L 33411 State & Zip	
305-776-1437 Daytime T	elephone number	
MILAN@BANKPLUSRE E-mail address: (to be use	ALTY.COM d for future annual report	notification)
	a'	

NOTE: Please provide the original 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

June 7, 2011

Mr. Milan Boyanich 3064 Santa Margarita Road West Paim Beach, FL 33411

Re: Bank Plus Realty Inc.

Dear Mr. Boyanich:

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

FINANCIAL SERVICES COMMISSION

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

ARTICLE I The name of the corp	FAME BANK PLUS REALTY oration shall be:	INC.		•	
30	PRINCIPAL OFFICE Principal street address 64 SANTA MARGARITA ROAD EST PALM BEACH FL 33411		Mailing address, if different is:		<u> </u>
ANY AND ALL I Profes ARTICLE IV S	ch the corporation is organized is: LAWFUL BUSINESS. Signal Corporation SHARES			SECRETARY OF ST	
The number of shares	NITIAL OFFICERS AND/OR DIRECTOR	<u>88</u> ,		RIPATE	
Name and Title Address:	e:MILAN D BOYANICH PRESIDEN 3064 SANTA MARGARITA ROAD WEST PALM BEACH FL 33411	_ Address	:		<u> </u>
Name and Title Address:	E:TAMMY BOYANICH VICE PRESIDEN 3064 SANTA MARGARITA ROAD WEST PALM BEACH FL 33411				<u> </u>
Name and Title Address:	e:	_ Name ar _ Address	nd Title: :		
	PEGISTERED AGENT				
	da street address (P.O. Box NOT acceptable) o		red agent is:		
Name: Address:	KALTENBACH & ASSOCIATES P 5271 NE 17 TER FORT LAUDERDALE FL 33334	. 			
ARTICLE VII I	NCORPORATOR	,			
	ess of the Incorporator is:				
Name:	MILAN D. BOYANICH JR.	_			
Address:	3064 SANTA MARGARITA ROAD WEST PALM BEACH FL 33411	_ _			
Having been num this certificate, I u	ned as resistered agent to accept vervice of process on familiar with anic accept the appointment as regularly the latest of the	tered agent (and agree to act is	lun at the place designated in this capacity	1 in _
•	Required Signature/Registered Agent			Date	
I submit this duck document to the D	unent and affirm it at the facts stated berein are t repartment of State constitutes a third degree felony	rue. I am ai as provided j	vare that the fais for in s.817.155,)	e information submitted in u	n a
	Required Signature/Incorporator			6/7/11	
	Milani D. Royani	111		Date	_