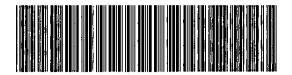
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(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
WH-4	1599	_		





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08/08/11--01041--014 **78.75



COVER LETTER

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

SUBJECT: Forward Equity Partners, Inc.					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)					
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:				
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
FROM: Philip J. Fischler, IV Name	(Printed or typed)				
6385 Presidential Ct, Sui	te 203				
Fort Myers, FL 33919	ddress State & Zip				
239-895-1060 Daytime Te	elephone number				
phil.fischler@forwardequitypartn	ers.com; philfischler4@comcast.net				

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 9, 2011

PHILIP J. FISCHLER, IV 6385 PRESIDENTIAL CT, SUITE 203 FORT MYERS, FL 33919

SUBJECT: FORWARD EQUITY PARTNERS, INC.

Ref. Number: W11000041599

We have received your document for FORWARD EQUITY PARTNERS, 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):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 211A00018699

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



ARTICLE I NAME FORM	uard Caville Darlage		,* 1	1-L-U
The name of the corporation shall be:	vard Equity Partner	rs, inc.	th auche) (5) (
ARTICLE II PRINCIPAL OFFIC	:E	•		8 PH 4: 05
Principal street ad			Mailing address, if different is RETAR	
6385 Presidential Ct		same	TALL ALLACO	Y OF STATE
Fort Myers, FL 3391			INLLAMASS	EE. FLORIDA
				<u> </u>
ARTICLE III PURPOSE				
The purpose for which the corporation is	organized is:			
Business service provider.	organizad is.			
F				
ARTICLE IV SHARES	_			
The number of shares of stock is: 100,000	0			
ARTICLE V INITIAL OFFICERS	S AND/OR DIRECTO	RS		
Name and Title: Philip J. Fischle			:Jeffrev A. Miller, Principal	
	ive		681 Katemore Lane	
	33919		Naples, FL 34108	
Name and Title		Name and Title	2:	
Address:		Address:	<u> </u>	
				
Name and Wales		31 1.001A		
A 1.1			: <u> </u>	
		Address:		
				
ARTICLE VI REGISTERED AGE			. •	
The name and Florida street address (P.C. Name:	K 15 (4 / 4 (4) 19/11 -			
Address: (03/55 V)	WEST OF NITHOU	でて ろしば	E 203	
FOUT V	MYEDS, FL 330	474		
	1-1/2/	L. !		
ARTICLE VII INCORPORATOR				
he name and address of the Incorporator				
	ler, IV, Principal			
Address: 957 Wittman D		_		
Fort Myers, El	L 33919			
laving been named as registered agent to	o accept service of proce	ss for the above st	ated corporation at the place designa	ted in
his certificate, I am familiar with and acce	get the appointment as re	gistered agent and	agree to act in this capacity	
			6 15 11	
TO TO	1/A		8.15.11	
Required Signat	ture/Registered Agent		Date	
$\mathcal{O}(\mathcal{I})$			and the state of t	
submit this document and affirm that the	ne jacts stated herein ar	re true. I am aware	that the faise information submitted	ın a
locument to the Department of State const	unies u intru vegree jeloi	ny as providea jor t	п 3.01 /.133, Г.З.	
· Wash	ice /		B.3.11	
T Darking dia	nature/Incorporator		8.3.11 Date	
' / Y /Kequired olgr	nature/incorporator '		Date	