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	(Requestor's Name)			
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	(City/State/Zip/Phone #)			
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PICK-UI	P WAIT MAIL			
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	(Business Entity Name)	-		
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Certified Copies	Certificates of Status			
Special Instructions	s to Filing Officer:			
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Office Use Only



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J. Sinvers SEP 1.6 2000

COVER LETTER

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

SUBJECT: Andrew P. Kalcounos (PROPOSED CORPORA	Inc ate name – <u>must inc</u> i	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art \$70.00	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee,

OM: Andrew Naicounos	
Name (Printed or typed)	
10 Lake Placid Place	
Address	
Palm Coast, FL 32137	
City, State & Zip	
386-986-8669	
Daytime Telephone number	

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 The name of the co	.NAME Andrew P. Kalcounos propration shall be:	, Inc	
ADMINI E II	NOTACIDAL OFFICE		
ARTICLE II	PRINCIPAL OFFICE Principal street address	Mailing ad	dress, if different is:
4	(A. Latin, Disabil Disab	ivialing ac	dress, if different is.
Ŀ	Palm Coast, FL 32137		
-			
ARTICLE III	PURPOSE		
The purpose for w	which the corporation is organized is:		
Real Estate S	Sales, Professional Corporation		
A DOTOL E TIL	CITADEO		
ARTICLE IV The number of sha			
i ne number of sna	res of stock is:10		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO	DRS	
	itle:Andrew Kalcounos,President		
Address:	10 Lake Placid Place	Address:	
	Palm Coast FL 32137		
	itle:	Name and Title:	
Address:		Address:	
			
Name and T	itle:	Name and Title:	
Address:		Address:	
7144.000.			
			2 to 100
			是说 班
	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable)	of the registered agent is:	0
Name:	Andrew Kalcounos		5 5 F
Address:	10 Lake Placid Place		
	Palm Coast, FL 32137		
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	Andrew Kalcounos		* N
Address:	10 Lake Placid Place		
	Palm Coast, FL 32137	<u> </u>	
Having been nam	ned as registered agent to accept service of proc	ess for the above stated corpo	ration at the place designated to
this certificate, I a	im familiar with and accept the appointment as r	registerea agent ana agree to ac	et in this capacity
			11
$-\sqrt{3}$	Required Signature/Registered Agent		_9/1/zori
/—/	Required Signature/Registered Agent		// Date
I makanda alata 2	and affine that the featureted hands	and thus I now process that the	false information submitted in
I SUDMIT THIS GOOD	ument and affirm that the facts stated herein a	ire irue. I am aware inal ine j ony as provided for in a 217 15	juise injormuuon suomuied in i 5 FC
uocument to the L	Department of State constitutes a third degree fel	ony as provided for in 8.017.13	والدو الا والد ر
-			
	Required Signature/Incorporator		9/1/2011 Date
/ 7	Trepatied Signature/Incorporator		/ / Date