

P12000038752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

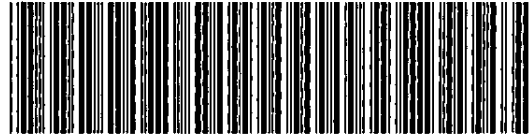
(Business Entity Name)

(Document Number)

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

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FILED  
12 APR 25 PM 4:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch APR 26 2012

## COVER LETTER

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

**DAVE REBEIRO, P.A.**

**SUBJECT:** \_\_\_\_\_  
(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:** \_\_\_\_\_  
Name (Printed or typed)  
  
\_\_\_\_\_  
Address  
  
\_\_\_\_\_  
City, State & Zip  
  
\_\_\_\_\_  
Daytime Telephone number  
  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**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 name of the corporation shall be: **DAVE REBEIRO, P.A.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
5718 Norman H. Cutson  
Orlando, FL 32821

Mailing address, if different is:  
P.O. Box 690842  
Orlando, FL 32869

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **The Practice of Real Estate**

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**ARTICLE IV SHARES**

The number of shares of stock is: **100**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: David Rebeiro - President  
Address: 5718 Norman H. Cutson  
Orlando, FL 32821

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:

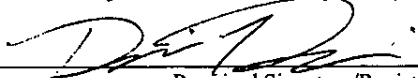
Name: David Rebeiro  
Address: 5718 Norman H. Cutson  
Orlando, FL 32821

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: David Rebeiro  
Address: 5718 Norman H. Cutson  
Orlando, FL 32821

*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

4/22/12  
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

4/22/12  
Date