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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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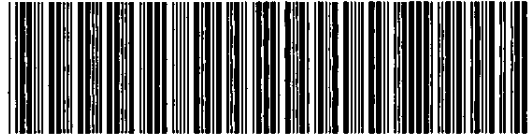
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 MAY -4 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 07 2012

COVER LETTER

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

SUBJECT: Zale-AZF, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Audrey Zale Flannery
Name (Printed or typed)

605 Andrews Avenue
Address

Delray Beach, Florida 33483
City, State & Zip

202-739-0380
Daytime Telephone number

Audrey.Cramer@cushwake.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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

Zale-AZF, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
605 Andrews Avenue
Delray Beach, Florida 33483

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To carry on real estate consulting service and to engage in any related lawful act or activity

ARTICLE IV SHARES

The number of shares of stock is: One thousand (1,000) shares of one class, voting common stock, at no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Audrey Zale Flannery, President</u>	Name and Title: _____
Address: <u>605 Andrews Avenue</u>	Address: _____
<u>Delray Beach, Florida 33483</u>	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Audrey Zale Flannery
Address: 605 Andrews Avenue
Delray Beach, Florida 33483

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Audrey Zale Flannery
Address: 605 Andrews Avenue
Delray Beach, Florida 33483

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

Audrey Zale Flannery
Required Signature/Registered Agent

4/30/2012
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.

Audrey Zale Flannery
Required Signature/Incorporator

4/30/2012
Date

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TALLAHASSEE, FLORIDA