

Jan. 7. 2013

3:32PM

No. 0895

P. 1

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

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From:

Account Name : NELSON & ASSOCIATES, C.P.A., P.A.
Account Number : I20120000083
Phone : (305) 593-0829
Fax Number : (305) 593-8744

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: LARISASWAY@YAHOO.COM

FLORIDA PROFIT/NON PROFIT CORPORATION
INNERCIRCLE REAL ESTATE, CORP.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

13 JAN -7 AM 9:15

ARTICLE I NAME INNERCIRCLE REAL ESTATE, CORP.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
215 SW 42 AVENUE #711
MIAMI, FL 33134

Mailing address, if different is:

PO BOX 348343
CORAL GABLES, FL 33234

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	LARISA DE LOS RIOS, PRESIDENT	Name and Title:	
Address:	PO BOX 348343	Address:	
	CORAL GABLES, FL 33234		

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:

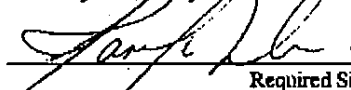
Name: NELSON & ASSOCIATES, CPA PA
Address: 1867 NW 97 AVE SUITE 102
MIAMI, FL 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

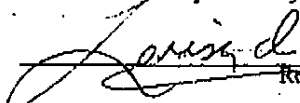
Name: LARISA DE LOS RIOS
Address: PO BOX 348343
CORAL GABLES, FL 33234

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

JANUARY 1, 2013
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

JANUARY 1, 2013
Date

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