

P13000007369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

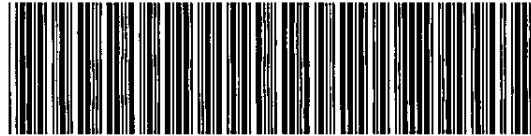
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100241950901

01/16/13--01013--014 **78.75

FILED

13 JAN 22 AM 11:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: REEL COASTAL PROPERTIES 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: KYMERLY BURTON
Name (Printed or typed)
14554 90TH AVENUE
Address
SEMINOLE, FL 33776-1956
City, State & Zip
407-928-1257
Daytime Telephone number
kymburton1@yahoo.com
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: **KYMERLY ANN BURTON, P.A.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

Kymerly Burton

14554 90th Avenue

Seminole, FL 33776

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE SALES AND MANAGEMENT.

ARTICLE IV SHARES

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **KYMERLY BURTON**

Address: **President**

14554 90th Avenue

Seminole, FL 33776

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

13 JAN 22 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

(cont.)

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: KYMERLY BURTON

Address: 14554 90th Avenue

Seminole, FL 33776

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: KYMERLY BURTON

Address: 14554 90th Avenue

Seminole, FL 33776

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

1/16/13
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

1/16/13

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

18 JAN 22 AM 11:56

FILED