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☐ PICK-UP	WAIT	MAIL
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SECALIVITY OF STATE

COVER LETTER

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

	<i></i>		
nclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation an	d a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM:	LAWRENCE K	, , , , , , , , , , , , , , , , , , , ,	
FROM:		, , , , , , , , , , , , , , , , , , , ,	
FROM:	722 PINELL	Address	SOUTH ALL
FROM:		Address RDE FL State & Zip	SOUTH ALL

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)

Principal street address		Mailing address, if o	different is:
22 PINELLAS BAYWAY.	50UTH 702	SAME	
TERRA YERDE, FL 33			
ICLE III PURPOSE urpose for which the corporation is organized	is:		
PROVIDE INVESTM	ENT HOVISOR	Y SERVI	CES
	· · · · · · · · · · · · · · · · · · ·		
CLE IV SHARES			
CLE IV SHARES umber of shares of stock is: /0,000			
CLE IV SHARES Imber of shares of stock is: / O, OOO	R DIRECTORS		
CLE V INITIAL OFFICERS AND/O	CROCKETT Name and Tit	le:	13 M SEC MLL
CLE V INITIAL OFFICERS AND/OR Name and Title: LAWRENCE K PRESIDENT / 2	CROCKETT Name and Tit	le:	13 MAR I SECRE F PALLAHA
CLE V INITIAL OFFICERS AND/OR Name and Title: LAWRENCE K PRESIDENT / 2	CROCKETT Name and Tit	le:	ECHE STAY
Name and Title: LAWRENCE K Address Address	CROCKETT Name and Tit DIRECTOR Address: SOVTH #102	le:	MAR III PM
CLE V INITIAL OFFICERS AND/OR Name and Title: LAWRENCE K PRESIDENT / 2	CROCKETT Name and Tit DIRECTOR Address: SOVTH #102	le:	MAR IN PM 3: ECREGIO DE STA LLAMASSES FIJOR
Name and Title: LAWRENCE K Address Address	CROCKETT Name and Tit DIRECTOR Address: SOVTH #102		MAR III PM
number of shares of stock is: // O, OOO CLE V INITIAL OFFICERS AND/OR Name and Title: LAWRENCE K Address PRESIDENT / I 722 PINEULI TIERRA VERD	CROCKETT Name and Tit DIRECTOR Address: TS BHYWAY SOVTH #102		MAR IN PM 3: ECREGIO DE STA LLAMASSES FIJOR
Name and Title: LAWRENCE K Address PRESIDENT / I 722 PINEULI TIERRA VERD Name and Title:	CROCKETT Name and Tit OIRECTOR Address: SOVTH #102 E, FL 33715 Name and Titl		MAR IN PM 3: ECREGIO DE STA LLAMASSES FIJOR
Name and Title: CLE V INITIAL OFFICERS AND/OR Name and Title: LAWRENCE	CROCKETT Name and Tit OIRECTOR Address: SOVTH #102 E, FL 33715 Name and Titl		MAR IN PM 3: ECREGIO DE STA LLAMASSES FIJOR
Name and Title: LAWRENCE K Address PRESIDENT / I 722 PINEULI TIERRA VERD Name and Title:	CROCKETT Name and Tit OIRECTOR Address: SOVITH #100 E, FL 33715 Name and Titl Address:		MAR 14 PM 3: 37 ECRESSION DF STATE LLAMASSEE FLOHIDA

Name and Title:	N	ame and Title:	
Address		ddress:	
	TERED AGENT et address (P.O. Box NOT acceptable) of the	e registered agent is:	
Name: LAV	VRENCE K. CROCKET	7	
Address: 722	PINELLAS BAYWAY	SOUTH #102	
<u></u>	ERRA VERDE, FL 3:	3715	
ARTICLE VII INCOR	PORATOR		
The name and address of t	he Incorporator is:	75E 3	
Name:	AWRENCE K. CROCK	terr A	
Address: Z	2 PINELLAS BHYWAY	Y SOUTH #102	; ;
7	ERRA YERDE, FL	337/5	,
	istered agent to accept service of process for or with and accept the appointment as registe	the above stated corporation at the place designated in red agent and agree to act in this capacity	
haurma	K. Creckttt	3-8-13	•
(Required Signature/Registered Agent	Date	
	l affirm that the facts stated herein are true t of State constitutes a third degree felony as	o. I am aware that the false information submitted in a provided for in s.817.155, F.S.	
- parruse	Required Signature/Incorporator	3-8-13	
1	Required Signature/Incorporator	Date	