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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 OCT 15 PM 1:24

10/1/13

**COVER LETTER**

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

**SUBJECT:** Valor Property Management, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Lisa Cohen

Name (Printed or typed)

123 SW 52nd Ter.

Address

Cape Coral, FL 33914

City, State & Zip

239-699-7730

Daytime Telephone number

LisaCapeCohen@Gmail.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2013

LSA COHEN  
123 SW 52ND TERRACE  
CAPE CORAL, FL 33914

SUBJECT: VALOR PROPERTY MANAGEMENT, INC.  
Ref. Number: W13000054287

RECEIVED  
13 OCT 15 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for VALOR PROPERTY MANAGEMENT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert  
Regulatory Specialist II  
New Filing Section

Letter Number: 113A00022961

## COVER LETTER

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

SUBJECT: **Valor Real Estate Services, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: **Lisa Cohen**

Name (Printed or typed)

**123 SW 52nd Ter.**

Address

**Cape Coral, FL 33914**

City, State & Zip

**239-699-7730**

Daytime Telephone number

**LisaCapeCohen@gmail.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:

Valor Real Estate Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

324 Nicholas Pkwy. W.

Ste. D.

Cape Coral, FL 33991

Mailing address, if different is:

123 SW 52nd Ter.

Cape Coral, FL 33914

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Residential & Commerical

Real Estate- Property Management- Home Watch

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

Name and Title:

Lisa Cohen

Address

CEO

123 SW 52nd Ter

Cape Coral, FL 33914

Name and Title:

Sheri Evenson

Address:

Treasurer

123 SW 52nd Ter

Cape Coral, FL 33914

Name and Title:

Lisa Cohen

Address

Secretary

123 SW 52nd Ter.

Cape Coral, FL 33914

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 OCT 15 PM 1:24

(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: Richard Ricciardi Jr., Esq.  
Address: 12601 Panasoffkee Dr.  
North Fort Myers, FL 33903

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lisa Cohen  
Address: 123 SW 52nd Ter  
Cape Coral, FL 33914

*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

9-23-13  
Date

*document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

9-23-13  
Date