## P13000095586

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
. (Bus	siness Entity Na	me)
(Doc	cument Number	)
ertified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	<del> </del>



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Office Use Only

## **COVER LETTER**

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

	ne Agency International Real	ty, Inc.	
SUBJECT:	(PROPOSED CORPO	DRATE NAME – MUST INCL	JDE SUFFIX)
Enclosed are an	original and one (1) copy of the	articles of incorporation and	l a check for:
☐ \$70.0 Filing Fo	00 □ \$78.75 ee Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM	April Brynn Munro	ame (Printed or typed)	
	1733 Hempel Ave		
		Address	<del> </del>
	Windermere, FL 34786		
	C	ity, State & Zip	· · · · · · · · · · · · · · · · · · ·
	407-617-8963		
	Daytim	ne Telephone number	
	ABrynnMunro@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)

The cor	mpany will mark	et and sell real property in
The cor	mpany will mark	
		15 HOV 25
FICERS AND/OR DIRECTO	<u>DRS</u>	PH 3: 23
·	Name and Title:	Ruth Coleman, Secretary 1733 Hempel Ave
rmere, FL 34786	_	Windermere, FL 34786
lempel Ave		
- 13	Hempel Ave rmere, FL 34786  Munro, Vice President Hempel Ave rmere, FL 34786	FICERS AND/OR DIRECTORS Brynn Munro, President  Hempel Ave  Address:  Address:  Munro, Vice President  Hempel Ave  Address:  Address:  Address:

Name and	i Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Flo	orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	April Brynn Munro	
Address:	1733 Hempel Ave	
	Windermere, FL 34786	
ARTICLE VII	INCORPORATOR	100 25 PH
The name and ad	dress of the Incorporator is:	
Name:	April Brynn Munro	٠ ٢3 ٢3
Address:	1733 Hempel Ave	پ چ <b>ن</b>
	Windermere, FL 34786	
I submit this floci	Required Signature/Registered Agent	$\frac{1}{20} \frac{2013}{2013}$ true. I am aware that the false information submitted in a