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. (R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
· (B	usiness Entity Name	e)
(Document Number)		
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE ALLAHASSEE FLORID:

COVER LETTER

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

SUBJECT: Florida Blue Chip Real Estate Services, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
		1	& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED

FROM: Ronald R Mesplay	
Name (Printed or	typed)
101 N Country Club Dr S	Suite 119
Address	13 SE TAL
Lake Mary, Florida 032	
City, State & Zip	
407-302-0919	
Daytime Telephone n	50
rfmesplay@yahoo.com	22 NDA

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)

RTICLE II PRI 01 N Country	NCIPAL OFFICE Principal street address / Club Rd.	Mailir Same	ng address, if different is:
Suite 119 ·		.	
ake Mary, Fl	orida 32746		
e purpose for which t	POSE he corporation is organized is: Establish an a		office for active real estate agents looking
rvices they can performe	ed. Most referral agents will deal with relatives,	friends, co-workers and their	r personal homes. Agents will receiv
ferral fee from Florida Bl	ue Chip that receives a commission from a full s	service office that has receiv	ved a referral from the Florida Blue C
eal Estate Corp. that is	pased on agreed referral fee paid to the referrin	g office from the full service	real estate office once referral close
		-c:	
	IRES 1000		
RTICLE IV SHA			
ne number of shares of	stock is: / / / / / / / / / / / / / / / / / / /		TA.
ne number of shares of	stock is: / / / / / / / / / / / / / / / / / / /		13 DE SECH TALLA
ne number of shares of	stock is: 7000		13 DEC - SECHETAL TALLAHAS
ne number of shares of RTICLE V INIT	rial officers and/or directo. Ronald R Mesplay, Presider	Name and Title:	13 DEC -5 P
ne number of shares of RTICLE V INIT	rial officers and/or director Ronald R Mesplay, Presider 157 Pine Tree Dr	Name and Title:	-5 PH L
ne number of shares of RTICLE V INIT	rial officers and/or director Ronald R Mesplay, Presider 157 Pine Tree Dr	Name and Title:	-5 PH L:
ne number of shares of RTICLE V INIT	rial officers and/or director Ronald R Mesplay, Presider 157 Pine Tree Dr	Name and Title: Address:	-5 PH 4: 22 ASSEE FLORIDA
ne number of shares of RTICLE V INIT	Ronald R Mesplay, Presider 157 Pine Tree Dr DeBary, Florida 32746	Name and Title: Address: Name and Title:	-5 PH 4: 22 ASSEE FLORIDA
RTICLE V INIT Name and Title Address	rial officers and/or director Ronald R Mesplay, Presider 157 Pine Tree Dr DeBary, Florida 32746	Name and Title: Address: Name and Title:	-5 PH 4: 22 ASSEE FLORIDA
RTICLE V INIT Name and Title Address	Ronald R Mesplay, Presider 157 Pine Tree Dr DeBary, Florida 32746	Name and Title: Address: Name and Title:	-5 PH 4: 22 ASSEE FLORIDA
RTICLE V INIT Name and Title Address	Ronald R Mesplay, Presider 157 Pine Tree Dr DeBary, Florida 32746	Name and Title: Address: Name and Title:	-5 PH 4: 22 ASSEE FLORIDA
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RTICLE V INIT Name and Title Address Name and Title Address	Ronald R Mesplay, Presider 157 Pine Tree Dr DeBary, Florida 32746	Name and Title: Address: Name and Title: Address: Name and Title:	-5 PH 4: 22 ASSEE FLORIDA

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	of the manistered agent in
Name:	lorida street address (P.O. Box NOT acceptable) o Ronald R Mesplay	of the registered agent is.
Address:	157 Pine Tree Dr.	_
	DeBary, Florida 32746	****
ARTICLE VII	INCORPORATOR	
	idress of the Incorporator is:	
Name:	Ronald R Mesplay	_
Address:	157 Pine Tree Dr	
	DeBary, Florida 32746	
Having been nar	ned as registered agent to accept service of proces	ss for the above stated corporation at the place designated
-	am familiar with and accept the appointment as re	
Fo	nald Messlay Required Signature Registered Ment	1/- 2 9 - 13 Date
I submit this doc	<i>V V</i>	e true. I am aware that the false information submitted in
for	Required Signature/Incorporator	1/-29-13 Date
	ŕ	TALLIA
		DEC - CRETA LAHAS
		<u>မှိုင်း</u> ဟံ နှ
		PH +:
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