01300100625

(Red	questor's Name)		
(Add	dress)		
(Add	dress)		
(City	y/State/Zip/Phon	e #)	
PICK-UP	WAIT	MAIL	
(Bus	siness Entity Na	me)	
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			



200254593872

12/18/13--01021--004 **87.50

SECRE TARY OF STATE OF STATE OF CORPORATIONS

Office Use Only

BN/19/13

COVER LETTER

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

SUBJECT:		aude SA ate name- <u>must incli</u>	JDE 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:

Monical Lande Esq.

Name (Printed or typed)

13300-56

S. Cleveland Ave

Address

Fort Myers F2 33707

City, State & Zip

(239) 246-6970

Daytime Telephone number

in Go B Mande Con

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

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II PRINCIPAL OFFICE	-	
Principal street addre	ess Mailing address, if d	lifferent is:
13300-56 (/	Classe la 1 Aug	
	Gerland Ave	
Fact Myers FL	33907	· · · · · · · · · · · · · · · · · · ·
·		
TICLE III PURPOSE		
purpose for which the corporation is orga	anized is: provide legal se	rices
	V 0	
TICLE IV SHARES	0	
TICLE IV SHARES number of shares of stock is: //	0	
number of shares of stock is:	 	
number of shares of stock is: / C	ND/OR DIRECTORS	
number of shares of stock is: / C	ND/OR DIRECTORS	
number of shares of stock is:	Name and Title:	
number of shares of stock is: TICLE V INITIAL OFFICERS AS Name and Title: Manica L Address / 3300 T	Name and Title:	
number of shares of stock is:	Name and Title:	
Name and Title: Marica L Address 3300 Clevela.	ND/OR DIRECTORS Name and Title: Address:	
Name and Title: Marica L Address 3300 Clevela.	Name and Title:	
Name and Title: Manica L Address 3300 TC Levels For My	Address: Address: Address:	13 DEC
Name and Title: Manica L Address 3300 TC Levels For My	ND/OR DIRECTORS Name and Title: Address:	- EC
Name and Title: Name and Title:	Address: Address: Name and Title: Name and Title: Name and Title:	8 3
Name and Title: Name and Title:	Name and Title: Name and Title: Name and Title: Name and Title:	8 3
Name and Title: Name and Title:	Address: Address: Name and Title: Name and Title: Name and Title:	8 3
Name and Title: Name and Title:	ND/OR DIRECTORS Name and Title: Address: Name and Title: Name and Title: Address:	8 3
Name and Title: Name and Title:	Address: Address: Name and Title: Name and Title: Name and Title:	8 3
Name and Title: Name and Title: Address Name and Title: Address Name and Title: Address	Address: Name and Title: Address: Name and Title: Address: Address:	EC 18 PM 12: 06
Name and Title: Name and Title: Address Name and Title: Address Name and Title: Address	ND/OR DIRECTORS Name and Title: Address: Name and Title: Name and Title: Address:	EC 18 PM 12: 06
Name and Title:	Name and Title:	EC 18 PM 12: 06
Name and Title:	Name and Title:	EC 18 PM 12: 06

Name and Title:	Name and Title:
Address	Address:
	40.
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box No.	OT acceptable) of the registered agent is:
Address: 13300-56	Le Esq. EFFECTIVE S. Cleveland Ave DATE
fort Mers, 1	4233907 The effective date
ARTICLE VII INCORPORATOR	42 33 907 The effective date Will be January 1, 20
The name and address of the Incorporator is:	74
Name: Monica Lou	de Ese.
Address: 13300-56	S. Cleveland Ave
Fart Myers,	FZ 33 907
	service of process for the above stated corporation at the place designated in opointment as registered agent and agree to act in this capacity
More In	12/16/2013
Required Signature/Regi	stered Agent Date
	tated herein are true. I am aware that the false information submitted in a hird degree felony as provided for in s.817.155, F.S.
Moran Fr	12/16/2013 Date
Required Signature/Inc	orporator Date
	13 . Div _s
	DEC

18 PM 12: 06