P14000028949

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	9 #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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TO ACKIE WELFIGE

2014 APR -1 194 (2: 52

14 APR -1 PH 1:0



APR - 1 2014 J. BRYAN

COVER LETTER

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

SUBJECT: Turnover Property Sirvines The (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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

FROM:	Eric Fountein
	Name (Printed or typed)
-	Olo 36 Fairmount Lene Address
	Tallahesse, F1-32308 City, State & Zip
	Daytime Telephone number
-	E-mail address: (to be used for future annual report notification)

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

I Eric Fountain house no intention of reinstehing burnover Property Services Inc. And the rame Can be relased

DOC# P12000039776

Eric Fountoiri Eric boule 4/1/14

TAPR-1 PA 1:01

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

	on shall be: Turnover Pro	7013		
	CIPAL OFFICE Principal <u>street</u> address	1	Mailing address, if different is:	14 17
2L3LFirms	ent Lane			
Tallcheis sec	_		60.14	
111011-3300			· 44.	. ,,
			·	
ARTICLE III PURP The purpose for which the	ose corporation is organized is:	main tenance.	+ repairs	
• •			,	
	•			
-				
		8/8		
ARTICLE IV SHAP	PES		•	
The number of shares of st			·	
,				
	IAL OFFICERS AND/OR DIRE			
Name and Title:	Gric Founter 1:2	Name and Title		
Address _	236 Formount Con	Address:		
	Tallahays-c. 5, 323	80		
-		, 		
-				
Name and Title:	,	Name and Title	(
Address		Address:		
				
Name and Title:_		Name and Title	·	
Address		Address:		
Addicas "		/\u00e4\u00		
•	<u> </u>			
		•		

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box N	OT accentable) of the registered agent is:
	• • •
Address: 2636 Fairmord	- Lane
Name: Et. C Founters Address: 2636 Ferrand	32356
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Gac Fourtin	
Name: Gric Fountering Address: De 36 Fairmo	at lane
Tallchesser	· (-3130p
Having been named as registered agent to accept this certificate, I am familiar with and accept the a	service of process for the above stated corporation at the place designated in oppointment as registered agent and agree to act in this capacity
Enci Seus-Required Signature/Reg	41,114
Required Signature/Reg	stered Agent Date
I submit this document and affirm that the facts document to the Department of State constitutes a	stated herein are true. I am aware that the false information submitted in a third degree felony as provided for in s.817.155, F.S.
E~i Soured Signature/In	41,114
Required Signature/In	corporator Date