## P1400065459

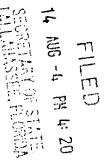
(Requestor's Name)			
(Address)			
(Ac	ldress)	· .	
(Cit	ty/State/Zip/Phone	e#)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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8/4/14

## COYER LETTER,

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

SUBJECT:	ALL KEYS REALTY, 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

t 1 \$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: ALICIA O. LOZANO			
Name (Printed or typed)			
914 S JADE DRIVE			
Address			
KEY LARGO FL 33037	<del></del> 1, -		
City, State & Zip	三 [28]	14	
305-986-7974		AUG	77
Daytime Telephone number		1:	
aliciainparadise@yahoo.com	<u></u>	133	
E-mail address: (to be used for future annual report notificati	on)	1	
	Ş⊈ITÎ.	20	

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)

-	in compliance with Chapter 607 and	vor Chapter 621, r.s. (Pron	FILED
ARTICLE I NAM The name of the corporat		LTY, INC.	FILED 14 AUG -4 PH 4: 20
	VCIPAL OFFICE Principal street address	Mailing ac	SECRETARY OF STATE Address, indifferent is: OF STATE
KEY LARGO	FLORIDA 33037		
ARTICLE III PURI The purpose for which the	POSE  ne corporation is organized is: REAL	ESTATE SERVI	DES
ARTICLE IV SHA	PFS 400		
ARTICLE IV SHA The number of shares of s	stock is: 100		
	TAL OFFICERS AND/OR DIRECTO	PC	
	Alicia O. Lozano, Pres.	Name and Title:	
Address	914 S Jade Drive	Address:	A A A A A A A A A A A A A A A A A A A
radioss	Key Largo FI 33037		
	VALUE OF THE PROPERTY OF THE P		
N	Alicia M. Lund, VP	No-co and Titles	
Address	11610 SW 97th Street	A 11	
Audicss	Miami FL 33176		
	<u> </u>		
Nama and Title		Nome and Title	
Address		Address:	
		<u>-</u>	

· Name and	d Title:	Name and Title:	
Address		Address:	
	***************************************		
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Alicia O. Lozano		
Address:	914 S Jade Drive		
	Key Largo FI 33037	_	
ARTICLE VII	INCORPORATOR		
The name and ad	Idress of the Incorporator is:		
Name:	Alicia O. Lozano		
Address:	914 S Jade Drive	_	
	Key Largo FI 33037		
Having been nan this certificate, I	ned as registered agent to accept service of procum familiar with and accept the appointment as	ess for the above stated corp registered agent and agree to	oration at the place designated in act in this capacity
			8/01/2014
	Required Signature/Registered Agent		Date
	ument and offirm that the facts stated herein a Department of State constitutes of th <del>ir</del> d degree fel		
'			8/01/2014
	Required Signature/Incorporator		Date
			TALL X
			FIL NUG -4 ETARY O
			TLED