

P/4000085563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

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14 OCT 20 PM 12:37

14 OCT 20 PM 12:24
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COVER LETTER

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

SUBJECT: **NRT FORECLOSURE 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 ☒ \$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: **Robert Gabriel**

Name (Printed or typed)

4000 Hollywood Blvd. Suite 555-S

Address

Hollywood, FL 33021

City, State & Zip

954-744-1254

Daytime Telephone number

robertegabriel@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)

NOTED
14 OCT 20 PM 12:24

ARTICLE I NAME

The name of the corporation shall be:

NRT Foreclosure Inc

14 OCT 20 PM 12:24

ARTICLE II PRINCIPAL OFFICE

Principal street address

MAILING ADDRESS
Mailing address, if different is:

4000 Hollywood Blvd. 555-S

Hollywood, Fl 33021

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Help homeowner facing foreclosure

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Robert Gabriel, President**

Name and Title: _____

Address **929 NW 161 ST AVE**

Address: _____

Hollywood, Fl 33021

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

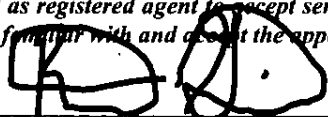
Name: Robert Gabriel
Address: 4000 Hollywood Blvd. 555-S
Hollywood, FL 33021

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robert Gabriel
Address: 4000 Hollywood Blvd. 555-S
Hollywood, FL 33021

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10-13-2014

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

10-13-2014

Date