## P15000006414

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200268085822

01/20/15--01047--001 \*\*87.50





## **COVER LETTER**

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

SUBJECT: RW	M Real Property		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	i 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 CO	PY REQUIRED
FROM:	oberto Mejill Tell	lado	
	Nam	e (Printed or typed)	
	0319 Desert Spa	Address	
M	/eeki Wachee, F		)
7	B7-594-8431	, State & Zip	
	Daytime 7	relephone number	

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

rmejill@gmail.com

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

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



he name of the corpora		RWM Rea	l Prope	rty Inc	· <u></u>	15 JAN 20	PH 12: 46
RTICLE II PRI	NCIPAL OFFI Principal street Sparrow	address			Mailing add	SECHETATY Lifess Lift differen	
Weeki Wache	e, FL 346	613-5310					
RTICLE III PUR he purpose for which	POSE the corporation is	s organized is:	"Any	and all la	awful bu	siness"	
	TIAL OFFICE	<b>RS AND/OR D</b>	-	-			
RTICLE V INI	<b>TIAL OFFICE</b> Roberto Mejil e:	ll Tellado -Presi	ident	Name and Ti	le:		
RTICLE V INI	TIAL OFFICE: Roberto Mejil 10319 De		ow Ave	Name and Ti	le:		
Name and Titl Address	Roberto Mejil e: 10319 De Weeki Wad	ll Tellado -Presi esert Sparro	ow Ave	Name and Tit			
Name and Titl Address	TIAL OFFICE: Roberto Mejil 10319 De Weeki Wad	ll Tellado -Presi esert Sparro chee, FL 346	ow Ave	Name and Ti	le:		
Name and Title  Address  Name and Title	TIAL OFFICE: Roberto Mejil 10319 De Weeki Wad	ll Tellado -Presi esert Sparro chee, FL 346	ow Ave	Name and Ti	le:		
Name and Title Address  Name and Title Address	TIAL OFFICE: Roberto Mejil 10319 De Weeki Wad	ll Tellado -Presi esert Sparro chee, FL 346	ow Ave	Name and Ti	lle:		



Name	and Title:	Name and Title:	15 JAN 20 PM 12: 46
Addre	ess	Address:	SECRETARY OF STATE TALLAMASSEE, FLORIDA
<u>ARTICLE VI</u>		_	
i he <u>name and</u>	Florida street address (P.O. Box NOT acceptable) of Roberto Mejill Tellado	the registered agent	I IS;
Name:	10319 Desert Sparrow		
Address:	Weeki Wachee, FL 34613-5310		
ARTICLE VI	<del></del>		
The <u>name and</u>	address of the Incorporator is:		
Name:	Roberto Mejill Tellado		
Address:	10319 Desert Sparrow		
	Weeki Wachee, FL 34613-5310		
	named as registered agent to accept service of process  I am familiar with and accept the appointment as regi		
			1/15/2015
	Required Signature/Registered Agent		Date
	locument and affirm that the facts stated herein are t the Department of State constitutes a third degree felony		
/			1/15/2015
	Required Signature/Incorporator	<del></del>	Date