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COVER LETTER

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

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Robert W. Kelsey P.A. SUBJECT:

(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 **Filing Fee**

Filing Fee & Certificate of Status

\$78.75

\$78.75 **\$87.50** Filing Fee & Certified Copy

Filing Fee, Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

FROM: Robert Kelsey

Name (Printed or typed)

3401 SW 49 Ter

Address

Ocala, Florida 34474

City, State & Zip

305-968-4213

Daytime Telephone number

rwk9381@aol.com

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

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

1 J	In compliance with Chapter 607 and	of Chapter 021, 1				
TICLE I NAM	ion shall be: Robert W. Kelse	ey P.A.			≥.0 11 115	15 M
	VCIPAL OFFICE				1	5
401 SW 49	Principal <u>street</u> address		Mailing ad	dress, if d	ifferent is	-0
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icala, F	2 39914					4
TICLE III PUR purpose for which the	pose the corporation is organized is: Real E	state Se	rvices	\$		
TICLE IV SHA number of shares of	<u>RES</u> stock is:					
number of shares of	stock is:					
number of shares of	<u>Stock is:</u> <u>IAL OFFICERS AND/OR DIRECTOR</u> Robert Kelsey President		Barbara	Kelsey V	ice- Pre	sident
number of shares of TICLE V INIT Name and Title	<u>TAL OFFICERS AND/OR DIRECTOR</u> Robert Kelsey President	Name and Title	Barbara 3401	-		
number of shares of	<u>TAL OFFICERS AND/OR DIRECTOR</u> Robert Kelsey President		:	SW	49 T	er
number of shares of TICLE V INIT Name and Title	<u>ral officers and/or director</u> Robert Kelsey President 3401 SW 49 Ter	Name and Title	3401	SW	49 T	er
number of shares of <u>TICLE V INIT</u> Name and Title Address	<u>ral officers and/or director</u> Robert Kelsey President 3401 SW 49 Ter	Name and Title Address:	3401 Ocala,	SW Florid	49 T a 344	er 74
number of shares of <u>TICLE V INIT</u> Name and Title Address	<u>ral officers and/or director</u> Robert Kelsey President 3401 SW 49 Ter Ocala, Florida 34474	Name and Title Address: Name and Title	3401 Ocala,	SW Florid	49 T a 344	er 74
number of shares of TICLE V INIT Name and Title Address Name and Title:	Anticek is: 1000 <i>TAL OFFICERS AND/OR DIRECTOR</i> Robert Kelsey President 3401 SW 49 Ter Ocala, Florida 34474	Name and Title Address: Name and Title	3401 Ocala,	SW Florid	49 T a 344	er 74
number of shares of TICLE V INIT Name and Title Address Name and Title:	<u>TAL OFFICERS AND/OR DIRECTOR</u> Robert Kelsey President 3401 SW 49 Ter Ocala, Florida 34474	Name and Title Address: Name and Title	3401 Ocala,	SW Florid	49 T a 344	er 74
number of shares of <u>TICLE V INT</u> Name and Title Address Name and Title: Address	<u>TAL OFFICERS AND/OR DIRECTOR</u> Robert Kelsey President 3401 SW 49 Ter Ocala, Florida 34474	Name and Title Address: Name and Title Address: Address:	3401 Ocala,	SW Florid	49 T a 344	er 74
number of shares of <u>TICLE V INT</u> Name and Title Address Name and Title: Address	<u>IAL OFFICERS AND/OR DIRECTOR</u> Robert Kelsey President 3401 SW 49 Ter Ocala, Florida 34474	Name and Title Address: Name and Title Address: Address: Name and Title	3401 Ocala,	SW Florid	49 T a 344	er 74

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Name	and Title:	Name and Title:	
Addre	SS	Address:	
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			MAR -2
he <u>name and</u>	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	Robert Kelsey		PMI2:44 CHISTATE ELIFLORIO
Address:	3401 SW 49 Ter		RIOA
	Ocala, Florida 34474		

The name and address of the Incorporator is:

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Name:	Robert Kelsey		
Address:	3401 SW 49 Ter		
	Ocala, Florida 34474		

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

(conti.)

 $\frac{2-25-15}{Date}$ Required Signature/Registered Agent Date *R*obz-+ ω . *R*ols - ψ *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 Robertw. Kersey

2-25-19 Date