Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000057775 3)))



H150000577753ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

ealty 10 AOL. com

From:

Account Name : GM FINANCIAL GROUP

Account Number: 119980000102 Phone: (954)428-8899 Fax Number: (954)428-6699

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Veteransk

o <u>...≦</u>___

FLORIDA PROFIT/NON PROFIT CORPORATION PATRICIA BLANCHETTE, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

T 03/09/15

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

15 MAR -6 AM 8: 56

H150000577753

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

The name of the corpo	AME PATRICIA BLANC	HETTE, P.A.		
ARTICLE II P	RINCIPAL OFFICE Principal street address TH STREET #5	Mailing address, if different is	ς.	
	DERDALE, FL 33308			_
ARTICLE III PU	VRPOSE th the corporation is organized is:	CE, REAL ESTATE	_	- -
		·	55 35	SEV
ARTICLE IV S. The number of shares	HARES 1000		AR -6 AM	RETARY OF DN OF CORP
	NITIAL OFFICERS AND/OR DIRECTORS	 S	8: 5	Y OF STAIL CORPORATION
	itle: PATRICIA BLANCHETTE, PRES		5	X
Address	3201 NE 36TH STREET #5			
	FT. LAUDERDALE, FL 33308	· · · · · · · · · · · · · · · · · · ·	w.	_
Name and Ti	itle:	Name and Title:		
Address		Address:		
				_
Name and Ti	itle:	Name and Title:	_	
Address		Address:	· · · · · · · · · · · · · · · · · · ·	
era 6000057775	3			

H15000057775 3

(conti.)

Name :	and Title:	Name and Title:
Addre	ss	Address:
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	Sobo annistand agent in
Name:	PATRICIA BLANCHETTE	the registered agent is.
Address:	3201 NE 36TH STREET #5	
Addiess:	FT. LAUDERDALE, FL 33308	MAR MAR
		- 0F 0R 0F 0
ARTICLE VI	I INCORPORATOR	A SPOR
The name and	address of the Incorporator is:	SIA 8: RAA
Name:	PATRICIA BLANCHETTE	56 TICH
Address:	3201 NE 36TH STREET #5	••
	FT. LAUDERDALE, FL 33308	
Having been n	amed as registered agent to accept service of process	s for the above stated corporation at the place designated in
this certificate,	I am familiar with and accept the appointment as reg	ristered agent and agree to act in this capacity
Pat	Dicia) Danckelle	3/11/15
	Required Signature/Registered Agent	/ Date
I submit this d	ocument and affirm that the facts stated herein afe	true. I am aware that the false information submitted in a
ancunient to th	Department of State constituted a third degree felon	y as provided for in \$61/.123, F.S.
	Required Signstrure/Incorporator	3/6/15 Date 1
/		' 1