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SECRETARY OF STAIL
ISION OF CORPORATIONS

1 03/17/15

COVER LETTER

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

SUBJECT:	ATHERINE AL (PROPOSED CORPORA	LEN P.A.	
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l 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:	Catherine 1	21 /	
	18911 Bay Woo	ds Lake Dr Address	#102
	Ft Myers City,	FL 33908 State & Zip	
	239-641- Daytime T		
<u></u>	Carightreal E-mail address: (to be use	tor Ogmail d for future annual report	, COM

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)

ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:	Mailing address, if different is:	
18911 Bay Woods Lake Dr			
Unit 102			
Ft myers FL 33908			
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Of residential Real E Florida	Sale and Listing contract State in Southwest	<u>ک</u> 	
	70 2	SECRETA	
ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR	<u> </u>	RY OF STATE	
Name and Title: Cathenine 17/16	en - President Name and Title:	_	
Address <u>18911 Bay Woods</u> <u>Unit 102</u>			
F+ myers FL			
	Name and Title:		
	Name and Title:Address:		
Name and Title:Address	Name and Title: Address: Name and Title:		

name an	1 1 tue	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
The name and Fl	orida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	Catherine Allen		
Address:	18911 Bay woods Lake Dr		DIVIS 151
	Ft myers FL 33908	-	CRETI-
ARTICLE VII	INCORPORATOR		FILEU ARY OF F CORPE
The name and ad	dress of the Incorporator is:		S S S
Name:	Catherive Allen		OF STATE RPORATION: PH12: 40
Address:	18911 Bay Woods Lake	Dr#102	
	Ft myers FL 33908		
Having been nam this certificate, La	ned as registered agent to accept service of process on familiar with and accept the appointment as regi	for the above stated corporation at the istered agent and agree to act in this cap	place designated in pacity
\mathcal{L}	HM XIL-	3-7	11-15
	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are to Department of State/constitutes a third degree felony		tion submitted in a
<u> </u>	Required Signature/Incorporator		1/-/5 Date