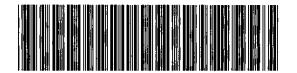
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	⇒ #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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WS-20413

COVER LETTER

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

SUBJECT:	Y EDWARDS-DALTON, P.A.		
SUBJECT:	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	*	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
	FANY DALTON Nam	e (Printed or typed)	
378	0 NW 84TH WAY		
CO	OPER CITY, FL 33024	Address	
	City	, State & Zip	
561	-685-8355		
	Daytime 7	Telephone number	
TIF	FANY@PRIMESOUTHFLORIDA	REALESTATE.COM	
	E-mail address: (to be use	ed for future annual report	notification)

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

COVER LETTER

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

Tif SUBJECT:		Edwards-Dalton, P.A		
SUBJECT:		(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an	origi	nal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.0 Filing Fo		\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
FROM		any Dalton		
i KOWI.	·	Name	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
	378	0 NW 84th Way		
			Address	
	Coc	oper City, FL 33024		
		City,	State & Zip	
	561	-685-8355		
		Daytime T	elephone number	
	Tiffe	any@nrimesouthfloridareal	actata com	

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

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)

TICLE II PRII	NCIPAL OFFICE Principal street address	Mailing a	address, if different is:
80 NW 84TH WA	Υ		
OOPER CITY, FL	33024		
RTICLE III PUR ne purpose for which	POSE 1 the corporation is organized is: REAL	ESTATE BUSINESS	
PTICIFIV SHA	RFS .		.,,.
e number of shares of shares of the shares o	of stock is: IAL OFFICERS AND/OR DIRECTOR THE ANY DALTON OWNER	<u>s</u>	
Name and Ti	of stock is: IAL OFFICERS AND/OR DIRECTOR THE ANY DALTON OWNER	S Name and Title:	1 51
e number of shares of shares of the shares o	of stock is: IAL OFFICERS AND/OR DIRECTOR tle: TIFFANY DALTON OWNER	<u>s</u>	
e number of shares of RTICLE V INIT Name and Ti Address	of stock is: IAL OFFICERS AND/OR DIRECTOR tle: 3780 NW 84TH WAY	S Name and Title: Address:	15 JUN 25 AM (
e number of shares of RTICLE V INIT Name and Ti Address	of stock is: IAL OFFICERS AND/OR DIRECTOR IIe: TIFFANY DALTON OWNER 3780 NW 84TH WAY COOPER CITY, FL 33024	S Name and Title: Address: Name and Title: Address:	15 JUN 25 AM 8: D.I
RTICLE V INIT Name and Ti Address Name and Tit	of stock is: IAL OFFICERS AND/OR DIRECTOR ITELE: TIFFANY DALTON OWNER 3780 NW 84TH WAY COOPER CITY, FL 33024	S Name and Title: Address: Name and Title: Address:	15 JUN 25 AM 8: 0.1
RTICLE V INIT Name and Ti Address Name and Tit Address	of stock is: IAL OFFICERS AND/OR DIRECTOR ITIFFANY DALTON OWNER 3780 NW 84TH WAY COOPER CITY, FL 33024	Name and Title: Address: Name and Title: Address:	15 JUN 25 AM 8: 0.1

Name a	nd Title:	Name and Title:
Addres		Address:
ARTICLE VI The name and I	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT accept	table) of the registered agent is:
Name:	TIFFANY DALTON	
Address:	3780 NW 84TH WAY	
	COOPER CITY, FL 33024	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The <u>name and a</u>	address of the Incorporator is:	3
Name:	TIFFANY DALTON	UN 2
Address:	3780 NW 84TH WAY	Section 1
	COOPER CITY, FL 33024	
Effective date, 1	f other than the date of filing: 6/24/2015	
days after the f		l cannot be more than five business days prior or 90 business
		slicable statutory filing requirements, this date will not be listed as
the document's	effective date on the Department of State's re	cords.
		process for the above stated corporation at the place designated in nt as registered agent and agree to act in this capacity
()		6/24/2015
	Required Signature/Registered Age	ent Date
	current and affirm that the facts stated here Department of State constitutes a third degree	ein are true. I am aware that the false information submitted in a ee felony as provided for in s.817.155, F.S.
7		6/24/2015
Requ	red Signature/Incorporator	Date