## P15000057190

(Re	equestor's Name)			
(Address)				
· (Ac	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
JUL 1 0 2015				
A. DUNLAP				

Office Use Only



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## **COVER LETTER**

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

SUBJECT: Baris Ke	eser P.A		
SUBJECT.	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 o Status
		ADDITIONAL CO	PY REQUIRED
FROM: Bar	is Keser Nam	e (Printed or typed)	
175	6 N Bayshore Drive 11B		
		Address	<del></del> · · · · · · · · · · · · · · · · · ·
Mia	mi, FL, 33132		<del>,</del>
	City	, State & Zip	
561	6028906		
	·	Telephone number	
bari.	skeser1982@gmail.com	od for future annual report	notification)
	E-mail address. (to be use	ed for future annual report	nouncation)

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 I NAME The name of the corpora	tion shall be:		
ARTICLE II PRINC 1756 N Bayshore Drive	Principal street address		ess, if different is:
	he corporation is organized is:	g real estate related transactions.	
			15 JUL -6 PH 12: 06
		Name and Title:	2: 08
Name and Title:			
Name and Title:		Name and Title:	
Address			

Name a	and Title:	Name and Title:
Addre	ss	Address:
	REGISTERED AGENT Florida street address (P.O. Box NOT acce	eptable) of the registered agent is:
Name:	Baris Keser	
Address:	same as above	TALLA
		JUL -6 PH 12: 06
ARTICLE VII	<u>INCORPORATOR</u>	7 P
The name and	address of the Incorporator is:	700 <b>(2)</b>
Name:	Baris Keser	
Address:	same as above	
Effective date, i		. (OPTIONAL) ad cannot be more than five business days prior or 90 business
	te inserted in this block does not meet the ap effective date on the Department of State's	oplicable statutory filing requirements, this date will not be listed as records.
Having been no this certificate, I	amed as registered agent to accept service of I am familiar with and accept the appointment	f process for the above stated corporation at the place designated in ent as registered agent and agree to act in this capacity
	mon	06-25-2015
	Required Signature/Registered A	gent Date
		rein are true. I am aware that the false information submitted in a ree felony as provided for in s.817.155, F.S.
	Me	7 06-25-2015
Requ	uired Signature/Incorporator	Date

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