## D15000063083

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Harrie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W15-47493

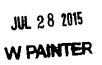
Office Use Only



200274576602

07/09/15--01024--004 \*\*70.00





## **COVER LETTER.**

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

SUBJECT: Bayview Breeze, Inc.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )	
Enclosed are an orig	rinal and one (1) copy of the arti	icles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED	
FROM:	Penelope	(Printed or typed)		
	$Cocal \leq 1$	210101V Address	1 33065	
	954-736	State & Zig	<u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>	
	E-mail address: (to be used	tzer Oc	muil 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)

	ill be: Dug VI OW I	<u>Breeze</u>	
CLE II PRINCIPAL ( Princip	OFFICE oal street address	Mail	ling address, if different is:
2000101	U-		1. O. BOX85
oral Spin	ngs, El 33065	·	ora   Springs   =
CLE III PURPOSE urpose for which the corp	poration is organized is: 1719	and hole	l real estate
CLE IV SHARES	16F)		
umber of shares of stock is:	: 100	- AA AA BAYT B	
CLE V INITIAL OFF	ICERS AND/OR DIRECTORS		
Name and Title: Pen	elope Fritzer, PSTI	Name and Title:	
Address 402	20 NW 100101 Dr.	Address:	
Cor	cal Springs		5
<u>E</u>	1 35065	<u> </u>	(C) Jan
Name and Title:		Name and Title:	Gen 2
A ddrees	<del></del>		
			<b>₩</b> ≈ \$
			<b>A</b> )
Name and Title:		Name and Title:	<b>A</b> )

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT a	acceptable) of the registered agent is:
Name: Penelope Frit	781
Address: 4020 N1(1) 101	Dr.
	15 FL 33065
CHUI GILLING	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: PENGLONG T	itzer
Address: 4020 NIN IC	DI DC. 55
Coral Sprin	05 FL 37/05 00 5
State of the state	To The state of th
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing:(If an effective date is listed, the date must be specified.	c and cannot be more than five business days: prior or 90 business
days after the filing.)	
	e applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Department of State	e s records.
	ce of process for the above stated corporation at the place designated in attment as registered agent and agree to act in this capacity
mus cerujação. Lam jaminar wan ana accept me appoin	A common as registered agent and agree to act in this capacity
Required Signature/Registered	$\frac{y(t)}{\sqrt{2}}$ $\frac{y(t)}{\sqrt{2}}$
	I herein are true. I am aware that the false information submitted in a
document to the Department of State constitutes of hird	
A CONOLOGO Stell	(Q.) 7/5/20/5
Required Signature/Incorporator/	/ /Date
-	