

P15000013230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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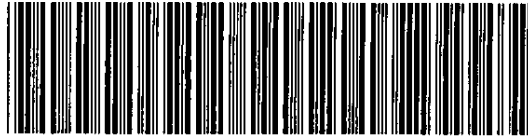
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 AUG 28 PM 2:19
CLERK OF STATE
TALLAHASSEE, FLORIDA

9/8/15

COVER LETTER

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

SUBJECT: BELLHOME INTERNATIONAL REALTY INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: BELLHOME INTERNATIONAL REALTY INC.

Name (Printed or typed)

181 SW 101ST AVE

Address

PLANTATION, FLORIDA 33324

City, State & Zip

954-895-3423

Daytime Telephone number

JULIE@JULIEMURRAYTEAM.COM

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

EFFECTIVE DATE 09/01/15

ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

The name of the corporation shall be: BELLHOME INTERNATIONAL REALTY INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

181 SW 101ST AVE

PLANTATION, FL 33324

Mailing address, if different is:

181 SW 101ST AVE

PLANTATION, FL 33324

CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE BROKERAGE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Linda Faille, PRESIDENT

Name and Title: _____

Address 181 SW 101ST AVE

Address: _____

PLANTATION, FL 33324

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Linda Faille
Address: 181 SW 101st Ave
Plantation, FL 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Linda Faille
Address: 181 SW 101st Ave
Plantation, FL 33324

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

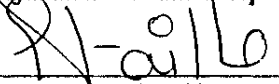
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 9/1/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

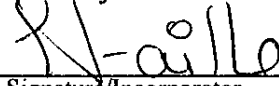
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent 8/24/2015
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator 8/24/2015
Date