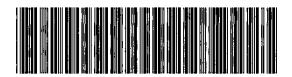
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(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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COVER LETTER

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

SUBJECT:

Meehan Real Estate, Inc.

matt@remaxinteractive.com

Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
🖾 \$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM: M	atthew Meehan Nam	e (Printed or typed)	
FROM:		e (Printed or typed)	
FROM:	Nam 72 Highland Ave	e (Printed or typed) Address	
FROM:	Nam 72 Highland Ave	· · · · · · · · · · · · · · · · · · ·	
FROM:	Nam 72 Highland Ave elbourne, FL 32935	· · · · · · · · · · · · · · · · · · ·	

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

Daytime Telephone number

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)

The name of the corpor			<u> </u>	
ARTICLE II PRIN	Principal street address		Mailing address, if different is:	
Melbourne, FL 32935				
ARTICLE III PURE	POSE Real Esta			
The purpose for which	the corporation is organized is.			····
			SEC	
				
			A .	
			4 · · · · · · · · · · · · · · · · · · ·	1000
ARTICLE V INITI	AL OFFICERS AND/OR DIRECTORS le:	Name and Title	Jeanette Meehan, Vice President	• • •
Address	474 Bimini Lane	Address:	2855 N. Highway A1A, Unit A	
	Indian Harbour Beach, FL 32937		Indiatlantic, FL 32903	
Name and Titl	e;	Name and Title	ţ	
Address				
				—
				
Name and Title	e:	Name and Title		
Name and Title	e:		:	

Name ar	nd Title:	Name and Title:
Addres		Address: .

	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable)	aftha magistarad agant is:
Name:	Matthew Meehan	of the registered agent is.
Address:	1372 Highland Ave.	
· ·	Melbourne FL 32935	
		_
ARTICLE VII	<u>INCORPORATOR</u>	
The name and a	address of the Incorporator is:	
Name:	Matthew Meehan	
Address:	1372 Highland Ave	<u> </u>
	Melbourne FL 32935	
ARTICLE VIII	EFFECTIVE DATE:	(OPTIONIAL)
(If an effective of days after the fi		not be more than five business days prior or 90 business
	e inserted in this block does not meet the applicabe effective date on the Department of State's record	ele statutory filing requirements, this date will not be listed as s.
	med as registered agent to accept service of proc am fumiliar with and accept the appointment as	
Mallher	N MUK- Required Signature/Registered Agent	9/3/15
	Required Signature/Registered Agent	Date
		re true. I am aware that the false information submitted in a
document to the	Department of State constitutes a third degree fel	ony as provided for in s.817.155, F.S.
Requi	pired Signature/Incomprator	Date