P1500086517

(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Reque	stor's Name)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addres	s)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addres	s)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/St	ate/Zip/Phone	#)
(Document Number) Certified Copies Certificates of Status	PICK-UP	WAIT	MAIL
Certified Copies Certificates of Status	(Busine	ss Entity Nam	ne)
	(Docum	ent Number)	
Special Instructions to Filing Officer:	Certified Copies	Certificates	of Status
	Special Instructions to Filin	g Officer:	

Office Use Only



900278001449

10/15/15--01007--003 **70.00

RATIONS

EFFECTIVE DATE 01/01/16

× 10/21/15

COVER LETTER

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

SUBJECT:	JFE LATO	TENAME - MUST HICL	LAC
	(PROPOSED CORPORA	ATENAME – <u>MUST HICL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	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 of
		ADDITIONAL CO	
FROM:	John Name	Espasito e (Printed or typed) Kon hou	
		Address State & Zip	'
	8/3-263-	elephone number	
	G-mail aderess: (to be use	d for future annual report r	notification)

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)

RTICLE I NAME the name of the corporation shall be:	Enterprises, Inc.
Principal street address	Mailing address, if different is:
6125 Galleon Way	
Tanpa, FL 3361	<u> </u>
RTICLE III PURPOSE the purpose for which the corporation is organize	is: Real Estate Services
	S COM
	<u> </u>
RTICLE IV SHARES ne number of shares of stock is:	<u>2 </u>
	to the second se
RTICLE V INITIAL OFFICERS AND/OR I	
Name and Title: Voka Espo	to Resident and Title:
Address 6/25 6all	Address:
Tanpa,	
336/5	
Name and Title.	N. LTV
	Name and Title:
Address	Address:
	
Name and Title:	Name and Title
	Name and Title:
	Name and Title:Address:

Name and Title:	Name and Title:		
Address	Address:		
ADDITION OF THE RESIDENCE AND ADDITI			
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Bo	ox NOT acceptable) of the registered agent is:		
/	sposito		
	/ ··		
Address:	Galleon Way	ewale	<u></u>
Tanpa,	FL 536/5	<u> </u>	
,			75 73
ARTICLE VII INCORPORATOR		ហ	6
The <u>name and address</u> of the Incorporator is:			
Name: John	Esposito		7
Address: 6/25	Galleon Way	5	3
7	E) 37/15		Ü
- Tanga,	12 338/3		
ARTICLE VIII EFFECTIVE DATE:	_		
Effective date, if other than the date of filing:	January 1, 20/6. (OPTION	NAL)	
(If an effective date is listed, the date must be days after the filing.)	e specific and cannot be more than five bu	siness days prior or 90 bus	ines
Note: If the date inserted in this block does not the document's effective date on the Departme		nents, this date will not be its	stea :
Having been named as registered agent to acc this certificate, Lam familiar with and accept t	rept service of process for the above stated co	rporation at the place design to act in this canacity	nated
0//-		. to uce or miss cupucity	
- John - Basis Simulation	D. i.e. of A	10/13/13	5
Required Signature/	-	Date	
I submit this document and affirm that the fadocument to the Department of State constitute	ncts stated herein are true. I am aware that t	the fulse information submit 17 155 F.S.	ted i
	and any as province for it stor		/

,

•