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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : BARINAS & ASSOCIATES INC.
Account Number : I20000000082
Phone : (305)871-0889
Fax Number : (305)870-9623

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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DIVISION OF CORPORATIONS

15 JAN 23 AM 7:10
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TALLAHASSEE FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
INTEGRITY REALTY PARTNERS INC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	$78.75

JAN 28 2016

S. PRATHER

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

ARTICLE I NAME
The name of the corporation shall be: INTEGRITY REALTY PARTNERS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address	Mailing address, if different is:
9010 SW 137 AVE, STE 230	8817 SW 113 Pl cir W.
MIAMI, FL 33186	Miami, FL 33176

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: ANY AND ALL LAWFUL PURPOSES

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT
Address: CARIDAD D. CALDERIN
9010 SW 137 AVE, STE 230
MIAMI, FL 33186

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
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: CARIDAD D. CALDERIN

Address: 9010 SW 137 AVE, STE 230

MIAMI, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: CARIDAD D. CALDERIN

Address: 9010 SW 137 AVE, STE 230

MIAMI, FL 33186

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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.

_____ 01/08/2015

Required Signature/Registered Agent 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.

_____ 01/08/2015

Required Signature/Incorporator Date