P1600014745

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	TIAW	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
		,		

Office Use Only



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12/07/15--01049--005 **78.75

TO FEB 16 PH 1:27
SECRETARY OF STATE





FLORIDA DEPARTMENT OF STATE Division of Corporations

December 17, 2015

WILLIAM F SAYERS 3673 DAYDREAM PL SAINT CLOUD, FL 34772 US

SUBJECT: WILLIAM F SAYERS P.A.

Ref. Number: W15000081224

We have received your document for WILLIAM F SAYERS P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tina D Cannon Regulatory Specialist II

Letter Number: 915A00026486

COVER LETTER

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

SUBJECT: WII	LLIAM F SAYERS P.A.				
SUBJECT	(PROPOSED COR	PORATE NAME - MUST INCLU	DE SUFFIX)		
Enclosed are an	original and one (1) copy of	the articles of incorporation and	a check for:		
☐ \$70.0 Filing Fe	· ·		\$87.50 Filing Fee, Certified Copy & Certificate o		
		ADDITIONAL CO	Status		
	WILLIAM COLUMNS				
FROM:	WILLIAM F SAYERS	Name (Printed or typed)			
		Name (Printed or typed)			
	3673 DAYDREAM PL				
		Address			
	SAINT CLOUD, FL 34772				
		City, State & Zip			
	407-572-7990				
	Day	time Telephone number			
	WSAYERS.REALTOR@GMAIL.COM				
•	E-mail address: (to	be used for future annual report no	otification)		

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)

ARTICLE II PRIN 3673 DAYDREAM P	ICIPAL OFFICE Principal <u>street</u> address L, SAINT CLOUD, FL 34772	Mailing ac	ddress, if different is:
ARTICLE III PURI The purpose for which	POSE LICENSED the corporation is organized is:	REAL ESTATE SALES A	ND INVESTMENTS.
RTICLE IV SHA		~ # 5	SECRE TALLAH
	AL OFFICERS AND/OR DIRECTORS WILLIAM F SAYERS. OWNER/DIRECT 3673 DAYDREAM PL, SAINT CLOUD, FL 34772	Name and Title: Address:	ASSEE FLORIDA
Name and Titl	e:		
Mana and Tid	e:	Name and Title:	

Name a	and Title:	Name and Title:	
Addres	ss	Address:	
			
ADTICI E VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	WILLIAM F SAYERS		
Address:	3673 DAYDREAM PL, SAINT CLOUD	_	
rtturess.	FL, 34772	_	
ADTICLE IVII	INCORDORATOR	_	
AKTICLE VII	<u>INCORPORATOR</u>		
The name and a	address of the Incorporator is:		
Name:	WILLIAM F SAYERS		
Address:	3673 DAYDREAM PL, SAINT		
	CLOUD, FL 34772		
APTICI E VIII	EFFECTIVE DATE: 10/31/2015		
Effective date, i	f other than the date of filing:	(OPTIONAL))
days after the f	date is listed, the date must be specific and can iling.)	ot be more than five busines	ss days prior or 90 business
	te inserted in this block does not meet the applicable effective date on the Department of State's records		s, this date will not be listed as
	med as registered agent to accept service of proce I am familiar with and accept the appointment as r		
			10/31/2015
	Required Signature/Registered Agent		Date
	cument and affirm that the facts stated herein ar Department of State constitutes a third degree <u>fe</u> lo		
		_	10/31/2015
Regu	ured Signature/Incorporator		Date