## P16000017309

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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A. DUNLAP
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Office Hos Oak



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02/10/16--01005--006 \*\*78.75

SECRETARY OF STA



February 22, 2016

JAMES SCHAB 700 WEST VENICE AVE VENICE, FL 34285

SUBJECT: AMERICAN REALTY REFERRAL COMPANY INC.

Ref. Number: W16000013097

We have received your document for AMERICAN REALTY REFERRAL COMPANY INC. 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P03000076031.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

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

New Filing Section.

Letter Number: 316A00003651

## COVER LETTER

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

SUBJECT: America	an Realty Referral Company Inc.		
SUBJECT.	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the ar	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 Status
		ADDITIONAL CO	DPY REQUIRED
FROM:	nes Schab Nam West Venice Ave.	e (Printed or typed)	
		Address	
Ver	nice, Fl. 34285		
	City	, State & Zip	-
941	-484-8080		
	Daytime 1	Telephone number	
jsch	ab@greenridge.com		
<del></del>	E-mail address: (to be use	ed for future annual report	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)

The name of the corpora	tion shall be: AMERICAN	KEALTY OF VE	Nick Leterr
ARTICLE II PRINC	•		ress, if different is:
Venice, Fl. 34285			
		#	
ARTICLE III PURPO The purpose for which t	OSE Real he corporation is organized is:	estate sales	
	•		16 FE
ARTICLE IV SHARI The number of shares of ARTICLE V INITIA	ES 100 stock is:  L OFFICERS AND/OR DIRECTOR	<u>&amp;</u>	B 10 PH 3: 58
Name and Title	James Schab - P	Name and Title:	, a 20
Address	700 West Venice Ave.	Address:	
	Venice, Fl. 34285		
Name and Title:		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address			
		1	. <del>12-</del>

	,	
Name an	d Title:	Name and Title:
Address		Address:
	**************************************	
TIÇLE YI .	REGISTERED AGENT	
	orida street address (P.O. Box NOT accept	able) of the registered agent is:
ıme:	James Schab	
dress:	700 West Venice Ave.	
	Venice, Fl. 34285	
		SEC SEC
TIÇLE VII	INCORPORATOR '	AHA TI
e <u>name and ad</u>	Idress of the Incorporator is:	1888 6 F
Name:	James Schab	<u> </u>
Address:	700 West Venice Ave.	O PM 3: 58
	Venice, Fl. 34285	
	EFFECTIVE DATE: February 8, 20	(OPTIONAL)
fective date, if an effective d ys after the fil	ate is listed, the date must be specific and ing.)	licable statutory filing requirements, this date will not be listed as
fective date, if an effective d ys after the file ete: If the date document's effectiving been name	ate is listed, the date must be specific and ing.) inserted in this block does not meet the applicative date on the Department of State's remed as registered agent to accept service of p	licable statutory filing requirements, this date will not be listed as cords.  process for the above stated corporation at the place designated in
fective date, if an effective d ys after the file te: If the date document's effectiving been name	ate is listed, the date must be specific and ing.) inserted in this block does not meet the applicative date on the Department of State's remed as registered agent to accept service of p	licable statutory filing requirements, this date will not be listed as cords.  process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
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rective date, if an effective days after the file.  te: If the date document's effective date document's effective date.  sying been names certificate, I document this document document.	ate is listed, the date must be specific and ing.)  inserted in this block does not meet the applicative date on the Department of State's remark as registered agent to accept service of pum familiar with and accept the appointment.  Required Signature/Registered Age	licable statutory filing requirements, this date will not be listed as cords.  process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity  February 8, 2016  Ent Date  pain are true. I am aware that the false information submitted in
fective date, if an effective days after the file. If the date document's effectivity been names certificate, I amount this document this document this document.	ate is listed, the date must be specific and ing.)  inserted in this block does not meet the applifective date on the Department of State's remed as registered agent to accept service of pum familiar with and accept the appointment.  Required Signature/Registered Agenument and affirm that the facts stated here	licable statutory filing requirements, this date will not be listed as cords.  process for the above stated corporation at the place designated in as registered agent and agree to act in this capacity  February 8, 2016  Ent Date  pain are true. I am aware that the false information submitted in

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