Ph (220362)4

(Re	equestor's Name)	 	
(Ac	ddress)		
(Ac	ddress)		
(Ci	ty/State/Zip/Phone	> #)	
PICK-UP	☐ WAIT	MAIL	
(Bi	usiness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
		!	
		:	

Office Use Only



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COVER LETTER

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

SUBJECT: iPro	o Real Estate I-C			
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an	original and one (1) copy of the articles of incorporation and a check for:			
	00 ■ \$78.75 ee Filing Fee & Certificate of Status Status ADDITIONAL COPY REQUIRE	of		
FROM	SECRITARY SECRITARY 1ALL TO VIEW			
	ED OF STATE OF 3: 07			
	;;>>			
Daytime Telephone number				
	jason@iprore.com			
	E-mail address: (to be used 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)

ARTICLE 1 NAME The name of the corpora			
ARTICLE II PRINCIPAL OFFICE Principal street address 1000 Bristol St N #17675		Mailing address,	f different is:
Newport Beach, CA 92	660		
ARTICLE III PURPO The purpose for which t	DSE To condulate the corporation is organized is:		
			TALL SEC
ARTICLE IV SHAR. The number of shares of	ES 100 stock is:		19 PX 3:
ARTICLE V INITIA Name and Title	AL OFFICERS AND/OR DIRECTORS Jason D Mechura, President e:		07
Address	1000 Britol St N #17675	4.4.4	
	Newport Beach, CA 92660		
Name and Title	·	Name and Title:	
Address			110
Name and Title	:	Name and Title:	
Address			

Name :	and Title:	Name and Title:	
Address		Address:	
			
	REGISTERED AGENT		
Name:	Florida street address (P.O. Box NOT acception Jason Mechura	table) of the registered agent is:	
Address:	100 Pierce St #409		<u>Fo</u>
	Clearwater, FL 33756		
<u>ARTICLE VII</u>	INCORPORATOR .	19 PH	TARY O
The name and	address of the Incorporator is:	<u>ား</u>	i enter
Name:	Jason Mechura	0	34
Address:	1000 Britol St N #17675		D.E.
	Newport Beach, CA 92660	·	
Effective date,		. (OPTIONAL) I cannot be more than five business days prior or 90 be	ısiness
	ate inserted in this block does not meet the application of the Department of State's re-	olicable statutory filing requirements, this date will not be ecords.	listed as
Having been n this certificate,	amed as regisfered agent to accept service of I am familiar with and accept the appointme	process for the above stated corporation at the place design as registered agent and agree to act in this capacity	gnated in
	1a///h	4/14/2016	
	Required Signature/Registered Ag	ent . Date	
I submit this d document to th	ocyment and affirm that the fact stated her Department of State constitutes a third degr	ein are true. I am aware that the false information subn ee felony as provided for in s.817.155, F.S.	itted in a
	/h /// X.	1/14/7/1	14
Req	uired Signature/Incorporator		
	, ,		