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SUBJECT: CARL ETTLINGER P. A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: CARL F. ETTLINGER

Name (Printed or typed)

325 OCEAN DR SUITE # 307

Address

MIAMI BEACH, FL 33139

City, State & Zip

9102641618

Daytime Telephone number

MIAMIIBROKER@GMAIL.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 I NAME

The name of the corporation shall be: CARL ETTLINGER P. A.

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address	Mailing address, if different is:
<u>325 OCEAN DRIVE</u>	<u></u>
<u>SUITE # 307</u>	<u></u>
<u>MIAMI BEACH, FL 33139</u>	<u></u>

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE PURCHASES, SALES, RENTALS AND
PROPERTY MANAGMENT SERVICES.

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>CARL F ETTLINGER</u>	Name and Title:	<u></u>
Address	<u>325 OCEAN DRIVE</u>	Address:	<u></u>
	<u>APT 307</u>		<u></u>
	<u>MIAMI BEACH, FL 33139</u>		<u></u>
Name and Title:	<u></u>	Name and Title:	<u></u>
Address	<u></u>	Address:	<u></u>
	<u></u>		<u></u>
	<u></u>		<u></u>
Name and Title:	<u></u>	Name and Title:	<u></u>
Address	<u></u>	Address:	<u></u>
	<u></u>		<u></u>
	<u></u>		<u></u>

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16 APR 26 AM 11:33

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: CARL F ETTLINGER
 Address: 325 OCEAN DRIVE APT 307
MIAMI BEACH, FL 33139

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: CARL F ETTLINGER
 Address: 325 OCEAN DRIVE APT 307
MIAMI BEACH, FL 33139

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

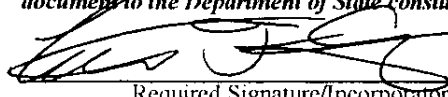


Required Signature/Registered Agent

4/20/2016

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.



Required Signature/Incorporator

4/20/2016

Date