P1600049371

(Requestor's Name)		
(Address)		
(Ad	ldress)	<u> </u>
(Cit	ry/State/Zip/Phone	e #)
PiCK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s 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:	Jawn Schwartz P.	4 .	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l 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	PY REQUIRED
FROM:	Dawn S Name	chwartz (Printed or typed)	
	8821 Valhall	a Drive	
	A	ddress	
	Delray Beach City,	FL 33446 State & Zip	
	561 - 703 - Daytime Te	OTT [
	dawnschwartz E-mail address: (to be used	sells @ gmail. C	com notification)

NOTE: Please provide the original and one copy of the articles.

COVER LETTER

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

SUBJECT:	Jann Schwartz P. (PROPOSED CORPORA	A TE NAME – <u>MUST INCL</u>	DE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	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	PY REQUIRED
FROM:	Dawn S	Schwartz e (Printed or typed)	
	8821 Valhal	la Drive Address	
	Delray Beach City,	FL 33446 State & Zip	
	<u> 561 - 703 -</u> Daytime T	O771 elephone number	
	<u>Clawn Schwartz</u> E-mail address: (to be used	sells & gmail, c	em otification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

16 JUN-6 PH 4: 10

TALLAHASSEE, FLORIDA

April 27, 2016

DAWN SCHWARTZ 8821 VALHALLA DRIVE DELRAY BEACH, FL 33446

SUBJECT: DAWN SCHWARTZ P.A.

Ref. Number: W16000031189

We have received your document for DAWN SCHWARTZ P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

List just the total amout of shares. NOT 100.00

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 616A00008724

Division of Comparations DO POV 6227 Tallahagaa Florida 2221

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

The name of the corpor	ation shall be: Dawn Schwe	utz P.A	. 16 JUN -6 PM 1- 20
ARTICLE II PRIN			Mailing address of different FLORIDA
	each, FL 33446	 	
ARTICLE III PURP The purpose for which	the corporation is organized is:Real	Estate Ser	vices
	f stock is: 100.00 / 80	10.74	
	le: Dawn Schwartz President	Name and Title	:Dawn Shwartz Treasurer
Address	8821 Valhalla Dr.		8821 Valhalla Dr.
	Delray Beach, FL 3344	16	Delay Brach, FC 33446
Name and Title	e:Dawn Schwartz V.P.	Name and Title	:
Address	8821 Valhalla Dr	_ Address:	
	Delroy Beach, Fl 33446	-	
Name and Title	e: Dawn Schwartz Secretary	Name and Title	:
Address	8821 Valhalla Drive		
	Delray Beach, FC 33446		
	,		

Name and 1	Citle:	Name and Title:	
Address	 	Address:	
	GISTERED AGENT ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Dawn Schwartz	_	
Address:	8821 Valhalla Dr	_	
-	Delray Beach, FC 3344	16	TALL!
ARTICLE VII IN	CORPORATOR		HASS
The name and add	ress of the Incorporator is:		
Name:	Dawn Schwartz	_	PM 4: 30 PM 4: 30
Address:	8821 Valhalla Dr.	_	30 30 A
	Delray Beach, FL 3344	16	·
Effective date, if otl (If an effective date days after the filing	FFECTIVE DATE: ner than the date of filing: e is listed, the date must be specific and cann g.) serted in this block does not meet the applicable	ot be more than five business day	-
	ctive date on the Department of State's records		
this certificate, I am	d as registered agent to accept service of proces familiar with and accept the appointment as re		
	Réquired Signature/Régistered Agent		4 18 16 Date
I submit this docum	nent and affirm that the facts stated herein are partment of State constitutes a third degree felo		
Required	n A hurarh I Signature/Incorporator		4/18/16 Date

. .