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COVER LETTER

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

UBJECT: Sut	nerland Escrow Services, Inc.			
obsect	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
closed are an	original and one (1) copy of the arti	cles of incorporation and	a check for:	
☐ \$70.0 Filing F	•	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL COPY REQUIRED		
FROM	Name 6039 Cypress Gardens Blvd., Suite 328	(Printed or typed)	 16	
		Address		
	Winter Haven, FL 33884			
	City, State & Zip			
	650-305-0124			
	Daytime T	elephone number		
	jaynasu@aol.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)

The name of the corporat		Inc.	
ARTICLE II PRINCIPAL OFFICE Principal street address 6039 Cypress Gardens Blvd., Suite 328		Mailing address	, if different is:
Winter Haven, FL 3388			
ARTICLE III PURPO The purpose for which t	DSE to engage the corporation is organized is:	in all business activities lawful in th	ne State of Florida.
			3.5 7.0 1.6
			LOW LOSS
	ES one thousand stock is: AL OFFICERS AND/OR DIRECTORS		TRY OF STATE
Name and Title	Jayna Sutherland, President & CEO	Name and Title:	
Address	6039 Cypress Gardens Blvd., #328	Address:	
	Winter Haven, FL 33884		
Name and Title	:	Name and Title:	
Address			
	:		-
Address			

Name ar	nd Title:	Name and Title:
Address	s	Address:
	REGISTERED AGENT Storida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Richard Sutherland	
Address:	6039 Cypress Gardens Blvd., #328	
	Winter Haven, FL 33884	.
ARTICLE VII	INCORPORATOR	- THA JUAN SECRE
	ddress of the Incorporator is:	
	Jayna Sutherland	
Name: Address:	6039 Cypress Gardens Blvd., #328	STATE ORID.
1100000	Winter Haven, FL 33884	— OE >
Effective date, it		(OPTIONAL) not be more than five business days prior or 90 business
	e inserted in this block does not meet the applical effective date on the Department of State's record	ole statutory filing requirements, this date will not be listed as is.
	med as registered agent to accept service of proc am familiar with and/accept the appointment as	ress for the above stated corporation at the place designated in registered agent and agree to act in this capacity
12:	Sol Struke	June 7, 2016
,	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein of Department of State constitutes a third degree fe	re true. I am aware that the false information submitted in a lony as provided for in s.817.155, F.S.
	mi Little 1	June 7, 2016
Requ	pired Signature/Incorporator	Date