

P/6000056019

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

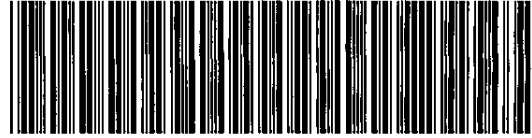
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

16 JUN 29 AM 11:24

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COVER LETTER

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

Dee Strom P.A.

SUBJECT: _____

(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
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 COPY REQUIRED

Dinah Strom
FROM: _____
Name (Printed or typed)

20228 Pond Apple Ln.

Address

Tampa, FL 33647

City, State & Zip

813-525-7851

Daytime Telephone number

Dee@FloridaExecutiveRealty.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 Dee Strom P.A.
The name of the corporation shall be: _____

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ARTICLE II PRINCIPAL OFFICE
Principal street address

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Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE FLORIDA

20228 Pond Apple Ln.

Tampa, FL 33647

ARTICLE III PURPOSE Real Estate services
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Dinah Strom, President	Name and Title: _____
Address: _____ 20228 Pond Apple Ln.	Address: _____
Tampa, FL 33647	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

Name and Title: _____
Address _____

Name and Title: _____
Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Dinah Strom
Address: 20228 Pond Apple Ln.
Tampa, FL 33647

ARTICLE VII INCORPORATOR

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

Name: Dinah Strom
Address: 20228 Pond Apple Ln.
Tampa, FL 33647

ARTICLE VIII EFFECTIVE DATE: 07/01/2016

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

06/24/2016

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

06/24/2016

Date