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(Requestor's Name)	
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PICK-UP WAIT MA	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Considerations to Filing Officer	
Special Instructions to Filing Officer:	}
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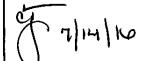


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3EP/4 (2015) 3F ( AT



## SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724 SUNSHINECORPORATE2014@GMAIL.COM

Date: 7-14-16	
ENTITY NAME: Kathrin Axer, PA	
Rad II / / / / / / / / / / / / / / / / / /	
**PLEASE FILE THE ATTACHED AND RETAIN Copy Certified Copy	ΓURN:**
**PLEASE OBTAIN THE FOLLOWING FOR THE A	BOVE ENTITY:**
Certified Copy of Arts & Amendments Certificate of Good Standing	
**APOSTILLE'/NOTARIAL CERTIFICAT	ION:**
COUNTRY OF DESTINATIONNUMBER OF CERTIFICATES REQUESTED	
TOTAL AMOUNT OWED:	ON ON THIS MATTER.
Thank you!	
Tina Goff, President	S JE TELED

### **ARTICLES OF INCORPORATION**

FILED

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) 16  $\,\,$  JUL 11:  $\,\,$  1:  $\,$  52

#### ARTICLE I NAME

The name of the corporation shall be:

KATHRIN AXER, PA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is :

1900 ALAMANDA DR UNIT 105 NAPLES, FLORIDA 34102

#### ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS LICENSED REAL ESTATE SERVICES - SALES ASSOCIATE.

#### ARTICLE IV SHARES

The number of shares of stock is:

1,500 COMMON SHARES PAR VALUE \$.01

#### ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

#### PRESIDENT:

KATHRIN AXER 1900 ALAMANDA DR UNIT 105 NAPLES, FLORIDA 34102

#### PAGE 2 KATHRIN AXER, PA

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16 JUL 14 PM 1:52

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

KATHRIN AXER 1900 ALAMANDA DR UNIT 105 NAPLES, FLORIDA 34102

#### ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

KATHRIN AXER 1900 ALAMANDA DR UNIT 105 NAPLES, FLORIDA 34102

Having been named as registered agent to accept service of process for the above 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.

KATHRIN AXER / Registered Agent

Date

I submit this document and affirm that facts stated herein are true. I am aware that any 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.

KATHRIN AXER / Incorporator

Date