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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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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: Kevit	n Spencer PA			
30D0EC1	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an o	riginal and one (1) copy of the art	icles of incorporation and	d a check for:	
\$70.00 Filling Fee		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
	ADDITIONAL COPY REQU		DPY REQUIRED	
FROM: _		e (Printed or typed)	·	
2 	808 Norris Ave		· <u>·</u> ·	
V	Vinter Park, Fl 32789	Address		
_	City, State & Zip			
4	07-383-4827			
<del></del>	Daytime T	elephone number		
k	evin-sells@hotmail.com			
	E-mail address: (to be use	d for future annual report i	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 corpora	Kevin Spencer PA		
ARTICLE II PRING	<u>CIPAL OFFICE</u> Principal <u>street</u> address	Mailing add	dress, if different is:
Winter Park, FI 32789			
	OSE the corporation is organized is:Real Esta	te	
ARTICLE V INITI	f stock is:  AL OFFICERS AND/OR DIRECTORS		TALL AHASSE SECRETARY TO NO 10
Address	2808 Norris Ave	Name and Title:	
	Winter Park, Fl 32789	Address:	(C)
Name and Titl	e:	Name and Title:	
Address			
Name and Titl	e:		
Address		Address:	

Name a	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT		
The <u>name and I</u>	Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	Kevin Spencer		
Address:	2808 Norris Ave		
	Winter Park, Fl 32789		
ARTICI F VII	INCORPORATOR		
	address of the Incorporator is:		Re 5
Name:	Kevin Spencer		
Address:	2808 Norris Ave		
	Winter Park, Fl 32789		
			# 9: 09
	EFFECTIVE DATE:	(ORTIONIAL)	9
(If an effective days after the t	f other than the date of filing:  date is listed, the date must be specific and filing.)	cannot be more than five business	days prior or 90 business
	te inserted in this block does not meet the appl effective date on the Department of State's red		nis date will not be listed as
Having been no this certificate,	imed as registered agent to accept service of p I am familiar with and accept the appointmen	process for the above stated corporati t as registered agent and agree to act t	on at the place designated in in this capacity
<del>\</del>			shills
	Required Signature/Registered Age	nt	Date
	ocument and affirm that the facts stated here e Department of State constitutes a third degre		
1	·		
$\rightarrow$			8/1//c Date
Keq	uired Signature/Incorporator		Date