## P160000 73/35

(Requestor's Name)					
(Address)					
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(Ci	y/State/Zip/Phon	<u>, #\</u>			
(Cil	y/State/Zip/Filofi	c #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Na	me)			
(Do	cument Number)				
Certified Copies	Certificate	e of Statue			
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Special Instructions to Filing Officer:					
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Office Use Only



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SECRETARY OF STATE:
DIVISION OF CORPORATIONS

N16 -058014

09/08/16



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2016

THEODORE LEB 19707 TURNBERRY WAY, APT. 25E MIAMI, FL 33180

SUBJECT: GLOBAL PROPERTIES, LLC

Ref. Number: W16000058014

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

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L04000036736.

Please return the corrected original and one copy of 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.

Thomas Chang Regulatory Specialist II New Filing:Section

Letter Number: 016A00017735

## **COVER LETTER**

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

		•	UDE SUFFIX)
osed are an o	riginal and one (1) copy of the artic	cles of incorporation and	La check for:
□ \$70.00 Filing Fee		□ \$78,75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM:	Theodore Leb		
	Name	(Printed or typed)	
1	19707 Turnberry Way, Apt 251.		
_	Λ	ddress	
>	Miami, Florida 33180	٠.	
**	City. 5	State & Zip	
C	0178538739		
	Daytime Te	dephone number	
រំា	nvestigate l@verizon.net .		

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)

RTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
707 Turnberry Way, Apt 25E	
Immi, Florida 33180	
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RTICLE III _PURPOSE	ed is:
	will activity for which corporations may be incorporated in this state.
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RTICLE IV SHARES 100 shares > he number of shares of stock is:	3.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5 5.5
he number of shares of stock is:	55
RTICLE V INITIAL OFFICERS AND/OR	DIRECTORS 5
RTICLE V INITIAL OFFICERS AND/OR	55
RTICLE V INTLAL OFFICERS AND/OR.  Name and Title:	DIRECTORS  Name and Title:
RTICLE V INTLAL OFFICERS AND/OR.  Name and Title:	DIRECTORS 5
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RTICLE V INITIAL OFFICERS AND/OR Name and Title:  Address	DIRECTORS  Name and Title:  Address.
RTICLE V INITIAL OFFICERS AND/OR Name and Title:  Address	DIRECTORS  Name and Title:  Address.
RTICLE V INITIAL OFFICERS AND/OR.  Name and Title:  Address	DIRECTORS  Name and Title:  Address.
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Name a	nd Title	Name and Title:	
Addres	55	Address:	
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		** ***********************************	
ARTICLE VI	<u>REGISTERED AGENT</u>		
	Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	URS Agents, LLC		<u>್</u> ಷ
Address:	3458 Lakeshore Drive		16 S
	Tallahassee, Fl. 32312		TP - FEAR
			7 A
ARTICLE VII	<u>INCORPORATOR</u>		AH IO:
The name and i	uddress of the Incorporator is:		vi ≒=
Name:	Theodore Leb		SKO IONS
Address:	19707 Turnberry Way, Apt 25E		
	Miami, Florida 33180		ı
<u>ARTICLE VIII</u> Dienosia a dara i	EFFECTIVE DATE:  Cother than the date of filing:	WINTE SN' A	
(If an effective	date is listed, the date must be specific and ca	innot be more than five busin	U) tess days prior or 90 business
days after the f	filing.1		
Note: If the dat	te inserted in this block does not meet the application	able statutory filing requiremen	nts, this date will not be fisted as
the document's	effective date on the Department of State's reco	rds.	
Having been no	imed as registered agent to accept service of pri	ocess for the above stated corn	oration at the place designated in
this certificate, i	I am familiar with and accept the appointment a onts, LLC	s registered agent and agree to	act in this capacity
Bu: Arm	Amy Purdy, Assistant S	Secretary	9)2/14
- J (	Amy Purdy, Assistant S Required Signature Registered Agent		Date
l submit this do	ocument and affirm that the facts stated herein	ure true. I am aware that the	false information submitted in a
document to the	Pepartment of State constitutes a third degree j	felony as provided for in s.817,	155, F.S.
1 hu	- h-		9/6/16
Redi	uired Signature/Incorporator		Date

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