

P16000076806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

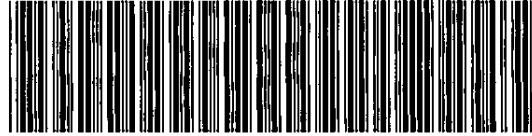
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/02/16--01020--018 **78.75

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16 SEP -7 AM 8:39

STATE DEPT. OF FLORIDA
TALLAHASSEE, FLORIDA

DH
9/19/16

title STATE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 18, 2016

KARERN RYAN
6831 SW 9TH ST.
PEMBROKE PINES, FL 33023

SUBJECT: KAREN RYAN - REALTOR, P.A.
Ref. Number: W16000057472

We have received your document for KAREN RYAN - REALTOR, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

TANYA L HENDERSON
Regulatory Specialist II

Letter Number: 816A00017512

RECEIVED
18 SEP -7 AM 10:57
TANYA L HENDERSON

FILED
18 SEP -7 AM 8:39
GEORGE BROWN, CLERK
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Karen Ryan - Realtor, P.A.
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Karen Ryan
Name (Printed or typed)

6831 SW 9th St.
Address

Pembroke Pines
City, State & Zip

954-605-5900
Daytime Telephone number

Karen.Ryan@Keyes.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

The name of the corporation shall be: Karen Ryan - Realtor, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address: 6831 SW 9 St.

Mailing address, if different is:

Pembroke Pines FL 33023

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: act as a sales agent for the buying and selling of Real Estate

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Karen Ryan Name and Title:

Address: 6831 SW 9 St. Address: Pembroke Pines FL 33023

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

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

ARTICLE VI REGISTERED AGENT

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

Name: Karen Ryan
Address: 6831 SW 9 St.
Pembroke Pines, FL 33023

ARTICLE VII INCORPORATOR

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

Name: Karen Ryan
Address: 6831 SW 9 St.
Pembroke Pines, FL 33023

STATE OF FLORIDA
DEPARTMENT OF STATE
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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 7/21/16 (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

Karen Ryan
Required Signature/Registered Agent

7/21/16
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.

Karen Ryan
Required Signature/Incorporator

7/21/16
Date