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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 MAY - 1 AM 10:20

FILED

EFFECTIVE DATE 04/25/17

05/02/17

COVER LETTER

Send to

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

SUBJECT: shari nix, pa

(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

FROM: shari nix

Name (Printed or typed)

1313 Murok Way S

Address

St Petersburg FL 33705

City, State & Zip

7275043130

Daytime Telephone number

snixgal@hotmail.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 Shari Nix, PA
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
1313 Murok Way S _____
St Petersburg, FL 33705 _____

ARTICLE III PURPOSE Real Estate Sales and Leasing
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 1
The number of shares of stock is: _____

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TALLAHASSEE FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	Shari Nix	Name and Title:	_____
Address	1313 Murok Way S	Address:	_____
	St Petersburg FL 33706		_____
	_____		_____

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

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

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: Jopseph Nix
 Address: 1313 Murok Way S
 St Petersburg FL 33705

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 TALLAHASSEE, FLORIDA
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ARTICLE VII INCORPORATOR

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

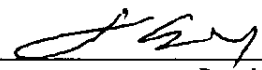
Name: Shari Nix
 Address: 1313 Murok Way S
 St Petersburg FL 33705

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 4/25/2017. (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

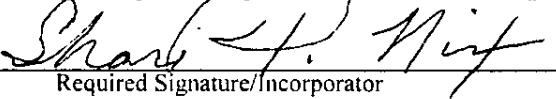


 Required Signature/Registered Agent

4/25/17

 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.

x 

 Required Signature/Incorporator

4/25/17

 Date