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CAPITAL CONNECTION, INC.

117 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
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zabeth Chamberlain Real Estate, P.A.

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
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____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
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____ Certificate of Good Standing _____
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____ Certificate of Fictitious Name _____
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Requested by: SETH

03/16/21

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COVER LETTER

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

SUBJECT: Elizabeth Chamberlain Real Estate, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Gregory S. Oropeza, Esq.
 Name (Printed or typed)
Oropeza, Stones & Cardenas, PLLC
221 Simonton Street
 Address
Key West, FL 33040
 City, State & Zip
305-294-0252
 Daytime Telephone number
elizabeth.chamberlain@yahoo.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: Elizabeth Chamberlain Real Estate, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1418 Pine Street
Key West, FL 33040

Mailing address, if different is:

1418 Pine Street
Key West, FL 33040

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: real estate sales.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

President

Name and Title: Elizabeth Chamberlain, / Name and Title: _____

Address 1418 Pine Street Address: _____
Key West, FL 33040

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: Gregory S. Oropeza

Address: 221 Simonton Street

Key West, FL 33040

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Elizabeth Chamberlain

Address: 1418 Pine Street

Key West, FL 33040

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

3-15-21

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.



Required Signature/Incorporator

3-15-21

Date