# PA3000015007

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FL

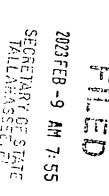
## **COVER LETTER**

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

SUBJECT: REILE REALTY			
(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	DE SUFFIX)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:	
□ \$70.00 ☑ \$78.75 Filing Fee Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL COI	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
	<u> </u>		
FROM: REINA J. MENDEZ			
Name	(Printed or typed)		
7675 FORDSON LN.			
Λ	ddress	<del></del> _	
WINDERMERE	, FL 34	786	
City, State & Zip			
	19-5123		
Daytime Te	lephone number		

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)



ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation sha	all bo: KEILE K	EALTY CO	RP.		
ARTICLE II PRINCIPAL	OFFICE pal street address		Mailing address,	if different is:	
ARTICLE III PURPOSE The purpose for which the corp LAWFUL BUSIN SERVICES AND CONSUMER PROD OR ANY OTHE	DOTATION IS ORGANIZED IS: REPRESENTATION DUCTS. REAL	DN FOR SALE ESTATE, MOR	AND PUR STGAGE, S	PROFES	STONA OR
ON MAY OTHE	TYPE OF	INVESTME	Ν1.		
Name and Title: REI Address 767	LOO EICERS AND/OR DIRECTO NA J. HENDEZ ( 5 FORDSON I NDERHERE, FL.	PRES. Name and Title			
Name and Title:		Name and Title	:		
Name and Title:				2023 FEB -9 AM SECRETARY CE ALLAHASSE	
Address		Address:		4 7:55 E F. L.	_ <b>_</b>

Name and	1 Title:	Name and Title:	
Address		Address:	
		<del></del>	
			,
	REGISTERED AGENT prida street address (P.O. Box NOT accept		
Name:	REINA J. HEND	<u> </u>	
Address:	7675 FORDSON LN		
	WINDERHERE, FL. 34		
ARTICLE VII	INCORPORATOR		
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	REINA J. MEND	<u> </u>	
Address:	7675 FORDSON LI WINDERHER, FL 3	N	
	WINDERHER FL 3	4786	
	inserted in this block does not meet the app fective date on the Department of State's re		, this date will not be listed as
	ed as registered agent to accept service of pr amiliar with and accept the appointment as		
	<u>,</u>		02-06-20 Date
	Required Signature/Registered Age		
I submit this doc document to the I	ument and affirm that the facts stated here Department of State constitutes a third degre	ein are true. I am aware that the fa re felony as provided for in s.817.155	lse information submitted in a , F.S.
	Arri.		06-06-208
Required Signatu	re/Incorporator	Da	te {
			⟨S ∼
			2023 F SECR TAL
			E ! 2023 FEB - SECRETA! TALLA!
			FEB-9 RETARY
			FEB-9 AH SETARY OF S LANASSEE
			FEB-9

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:	ILE KEALTY	CORP.		
ARTICLE II PRINCIPAL OFFICE  Principal street addre  7675 FORDSON LN.  WINDER MERE, FL. 3478	ess		address, if different is:	
ARTICLE III PURPOSE The purpose for which the corporation is orga LAWFUL BUSINESS. T SERVICES AND REPRESE CONSUMER PRODUCTS. OR ANY OTHER TY	O ENGAGE ENTATION FOR REAL ESTATE	SALE AND MORTGA	IND PROFES PURCHASE SE, STOCKS,	STON A OR
· ·	NDEZ (PRES.) Nar DSON LN. Ad	-		
Name and Title:		ne and Title:		
Name and Title:  Address		ne and Title:	<del> </del>	2023 FEB - 9 A
				7

Name and Title:	Name and Title:
Address	Address:
·	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Bo.	NOT acceptable) of the resistant language
Name: REINA J.	
Address: 7675 FORDSON	
WINDERHERE, F	
W. W. W. L.	<u> </u>
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	1
Name: REINA J.	
Address: 7675 FORD	SON LN
WINDERHER,	FL. 34786
,	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing:	02/07/2023. (OPTIONAL) e specific and cannot be more than five days prior or 90 days after the
Note: If the date inserted in this block does not the document's effective date on the Department	t meet the applicable statutory filing requirements, this date will not be listed as nt of State's records.
Having been named as registered agent to accept certificate, I am familiar with and accept the ap	nt service of process for the above stated corporation at the place designated in this pointment as registered agent and agree to act in this capacity
	02-06-2083
Required Signature/R	Legistered Agent Date
I submit this document and affirm that the fac document to the Department of State constitutes	ets stated herein are true. I am aware that the false information submitted in a capture at third degree felony as provided for in s.817.155, F.S.
Arm.	
Required Signature/Incorporator	Date 06-2023,
	(0. ~
	1023 F TAL
	S. C. Lane
	rη <b>Cn</b>

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WINDERMRE, FEBRUARY 06, 2023

TO: DEPARTMENT OF STATE

**DIVISION OF CORPORATION** 

**NEW FILING SECTION** 

### **AFFIDAVIT**

I, REINA J. MENDEZ FILED ON JANUARY 9, 2023, A LIMITED LIABILITY COMPANY WITH THE NAME: REILE REALTY LLC, DOCUMENT NUMBER: L23000019465 AND I VOLUNTARILY DISSOLVED IT ON FEBRUARY 3, 2023.

NOW, I WANT TO LET YOU KNOW THAT I AM FILING A NEW CORPORATION WITH THE SAME NAME: REILE REALTY CORP, I WANT TO KEEP THE SAME NAME.

I HAVE ATTACHED THE NEW ARTICLES OF INCORPORATION.

ADDITIONAL ATTACHED THE LETTER OF DISSOLUTION OF THE REILE REALTY LLC.

THANK YOU,

02-06-2023.

REINA J. MENDEZ

2023FEB -9 AM 7:55 SECRETARY OF STATE

## State of Florida Department of State

I certify from the records of this office that REILE REALTY LLC was a limited liability company organized under the laws of the State of Florida, filed on January 9, 2023, effective January 9, 2023.

The document number of this limited liability company is L23000019465.

I further certify that said limited liability company was voluntarily dissolved on February 3, 2023, effective February 3, 2023.

FILED

2023 FEB -9 AM 7:55

SECRETARY OF STATE

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Fifth day of February, 2023



Secretary of State

Authentication ID: 200402042552-020523-L23000019465

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html