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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

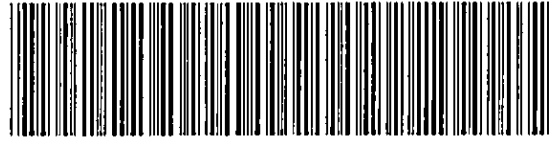
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2020 JAN -6 AM 10:35

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# COVER LETTER

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

SUBJECT: Real Estate Inspections Inc  
(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: Jorge Luis del Castillo  
Name (Printed or typed)

810 Wadsworth st. Apt. 101 B  
Address

Tallahassee, FL 32304  
City, State & Zip

407-3340575  
Daytime Telephone number

realestateinspectionsapp@gmail.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: Real Estate Inspections Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
810 Woodsworth St - 101 B  
Tallahassee, FL 32304

Mailing address, if different is:  
same

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: sole inspection services using an  
app.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	<u>Jorge Luis del Castillo/DIC</u>	Name and Title:	<u>[Signature]</u>
Address	<u>810 Woodsworth St. 101B</u> <u>Tallahassee, FL 32304</u>	Address:	_____

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

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

20 JAN -6 11:10:50  
Tallahassee, FL

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: Jorge Luis del Castillo  
Address: 810 Wadsworth St. 101B  
Tallahassee, FL 32304

20 JAN -5 11:10:50  
: 11  
Secretary of State

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jorge Luis del Castillo  
Address: 810 Wadsworth St. 101B  
Tallahassee, FL 32304

**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  
Date 01/06/2020

*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  
Date 01/06/2020