## P110000084969

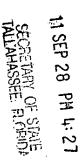
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Statu	ıs	
Special Instructions to Filing Officer:		
	ı	

Office Use Only



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## **COVER LETTER**

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

	Braswell PH
(PROPOSED CORPORAT	E NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the artic	les of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
1400 NW 10th A	(Printed or typed)  12 April 1905  ddress
Miami, FL 3.	3136-1043 State & Zip
305 - 301 785  Daytime Te	elephone number
ANDRKC 305 (E-mail address: (to be used	CMAIL. COM

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)

The name of the corporation shall be: White English & Braswell PA			
		•	
Principal street address Ave \$1905  Migmi, \$1, 33136-1943	Mailing ac	Idress, if different is:	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  [EG	AL SERVICE	45	
ARTICLE IV SHARES The number of shares of stock is:			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	<del>7 - 14</del>		
Name and Title: Note to Land In the Address:	Name and Title: Address:		
Mani, FL 33/36-10			
Name and Title:	Name and Title:		
Address:	Address:		
Name and Title:			
Address:	Address:		
ARTICLE VI REGISTERED AGENT		₹0 <del></del>	
The name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:	ES S	
Name: Note of L. Whole III.	AIS	ET P	
Address: (400 NW 157 Hm 1	<del>76</del> 7 <del>7</del>	28 28 SSE	
747414 4 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
ARTICLE VII INCORPORATOR			
The name and address of the Incorporator is:	1	为型 · .	
Address: 1400 NW 107 Aw 4/	405 1243	95m. (7	
Having been named as registered agent to accept service of proce	ess for the above stated corpo	oration at the place designated in	
this certificate. Dum familiar with and accept the appointment as r	egistered agent and agree to a	ect in this capacity	
SALL X LAND		9/2////	
Required Signature/Registered Agent		Date	
, , ,	_	, Daw	
I submit this document and affirm that the facts stated herein a document to the Department of State constitutes of third degree feld	re true. I am aware that the	false information submitted in a	
accument to the repairment of signe constitutes fruiri degree feld	ту из <i>ргочиси јог и</i> с 5.01/.1.	0/9//11	
Value of Mill MI		7/26/1/	
Required Signature/Incorporator		Date	