(Re	questor's Name)	 .
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COVER LETTER

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

SUBJECT: Law Office of Daniel A. Milian, 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 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
		ADDITIONAL COPY REQUIRED		

FROM:	Daniel A. Milian
i Kowi	Name (Printed or typed)
	2025 SW 32 Avenue, Suite 130
	Address
	Miami, Florida 33145
	City, State & Zip
	(305) 588-4319
	Daytime Telephone number
	damilian.esq@gmail.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)

ARTICLE I NAM The name of the corporat	ne Law Office of Dan	el A. Miliar	, P.A.		
ARTICLE II PRI	NCIPAL OFFICE Principal street address EVENUE, Suite 130		failing address, if differe	nt is:	
Miami, Florida					
The purpose for which to permissible by	POSE the corporation is organized is: Alaw.	le any and a	II necessary leg	al ser	vices
	stock is:			13 JUL 10	SECKETA
Name and Title	Daniel A. Milian, President	Name and Title:			- C X
Address	2025 SW 32 Avenue	Address: _		AH 8:	- 20 € 5
	Suite 130			<u> </u>	TATE
	Miami, Florida 33145	- -			<u>~~</u>
Name and Title:		Name and Title:			
Address	<u> </u>	Address: _			
		-			
		-			· · · · ·
Name and Title:		Name and Title:			
Address		_ Address: _			
	<u></u>	- -			

Name and	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
	orida street address (P.O. Box NOT acceptable) of Daniel A. Milian	the registered agent is:
Name:	2025 SW 32 Avenue, Suite 130	
Address:	Miami, Florida 33145	· <u>·</u>
ARTICLE VII	INCORPORATOR	SECRETARY OF CO.
The <u>name and ad</u>	Idress of the Incorporator is:	
Name:	Daniel A. Milian	3 30 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Address:	2025 SW 32 Avenue, Suite 130	8: 5
	Miami, Florida 33145	ions ions
this certificate, I d	Required Signature/Registered Agent	7/8/13 Date true. I am aware that the false information submitted in a