

P/4/000013529

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

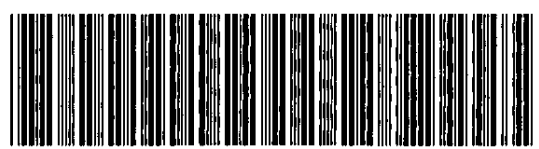
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300256033303

02/10/14--01024--008 **78.75

14 FEB 10 AM 9:30
DIVISION OF CORPORATIONS
DEPT. OF STATE

[Handwritten Signature]
2-13-14

COVER LETTER

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

SUBJECT: EZ TEAM, 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

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

ADDITIONAL COPY REQUIRED

FROM: EVELYN P. ZAMORA
Name (Printed or typed)

4726 S.W. 186TH. WAY
Address

MIRAMAR, FL 33029-6220
City, State & Zip

954-433-3849 / 954-608-5233
Daytime Telephone number

EVELYN ZAMORA @ KEYES.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)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 FEB 10 AM 9:30

ARTICLE I NAME

The name of the corporation shall be: EZ TEAM, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4726 SW 186TH Way
Miramar, FL 33029-6220

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Associate

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Evelyn Zamora, President

Name and Title: _____

Address 4726 SW 186 way

Address: _____

MIRAMAR FL 33029

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

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: Evelyn Zamora

Address: 4726 SW 186 Way

Miramar, FL 33029

ARTICLE VII INCORPORATOR

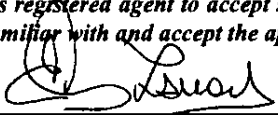
The **name and address** of the Incorporator is:

Name: Evelyn Zamora

Address: 4726 SW 186 Way

MIRAMAR - FL 33029

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

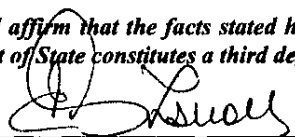


Required Signature/Registered Agent

2/5/14.

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

2/5/14.

Date