P99000030978

TRANSMITTAL LETTER

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314 SUBJECT: CARL LOVETERE, PA (Proposed corporate name-must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: <u>X</u>\$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee Filing Fee. & Certificate & Certified Copy Certified Copy & Certificate 800002825568 FROM: CARL S. LOVETERE J. . *****70.00 *****70.00 Name (printed or typed) 13514 NORTHUMBERLAND CIRCLE Address WELLINGTON, FL 33414 City, State & Zip CORRECT

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

Daytime Telephone number

(561) 791-2169

15° 4

DGC EXAM

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

<u>ARTICLE 1 NAME</u>

The name of the corporation shall be:

CARL LOVETERE, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13514 NORTHUMBERLAND WELLINGTON, FL 33414

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 (ONE HUNDRED SHARES)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

STEVEN H. MACHIELA, CPA 6801 LAKE WORTH ROAD, SUITE 124 LAKE WORTH, FL 33467

ARTICLE V INCORPORATOR (S)

The name(s) and street address(es) if the incorporator(s) to these Articles of Incorporation is (are):

CARL S. LOVETERE, PRESIDENT 13514 NORTHUMBERLAND CIRCLE WELLINGTON, FL 33414

The undersigned incoporator(s) has (have) executed these Articles of Incorporation this 19TH DAY OF MARCH, 1999.

CARL S. LOVETERE J-

Signature

Signature

Signature

The specific purpose of the Corporation shall be: Real Estate_

Articles of Incorporation Filing Fee - \$35

<u>CERTIFICATE OF DESIGNATION OF</u> <u>REGISTERED AGENT/REGISTERED OFFICE</u>

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.501, FLORIDA STATUES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is <u>CARL LOVETERE, PA</u>	<u>*</u>
	= .
2. The name and address of the registered agent and office is:	TALLAH SEULAH
STEVEN H. MACHIELA, CPA (Name)	PM 2
6801 LAKE WORTH ROAD, SUITE 124 (PO Box not acceptable)	29 LPRIDA
LAKE WORTH, FL 33467 (City, State, Zip)	enger enger enger

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Signature)

(Date)

DIVISION OF CORPORATIONS, PO BOX 6327, TALLAHASSEE, FL 32314