(Requestor's Name)				
,				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Cashisas Lilas)				
(Document Number)				
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Codified Coming				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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10/06/05--01018--009 **70.00

COVER LETTER

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

_{SUBJECT:} Kris	ty A. Mount, P.A.			
	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	la check for:	
enclosed are an orig	ginar and one (1) copy of the arti	eles of fileorporation and	a check for.	
\$70.00	\$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		A D D TODA A L. C.C.	Status	
		ADDITIONAL CO	DPY REQUIRED	
EDOM K	risty A. Mount			
FROM: 1		(Printed or typed)		
	605 South Palm Avenu	ue		
		Address		
	Titusville, FL 32796			
	City,	State & Zip		
	004 005 0504			
	<u>321-385-3534</u>			
Daytime Telephone number				

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)

FILED SECRETARY OF STATE DIVISION OF CONTORATIONS

05 OCT -6 PM 4: 13

ARTICLE I NAME

The name of the corporation shall be:

Kristy A. Mount, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

605 South Palm Avenue Titusville FL 32796

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to engage in the general practice of law through its officers, agents, and employees who are duly licensed or otherwise legally authorized to render such services within the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Kristy A. Mount, President/Secretary/Treasurer/Director 605 South Palm Avenue
Titusville FL 32796

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Kristy A. Mount 605 South Palm Avenue Titusville FL 32796

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kristy A. Mount 605 South Palm Avenue Titusville FL 32796

Having been named as registered agent to accept service of process for t	
certificate, I am familiar with and accept the appointment as registered ag	ent and agree to act in this capacity
Kustax A Moust	9/27/05
Signature/Registere i Agent	Date
Kinty & Mars	9/27/05
Signature/Incorporator	Date