10000000 FILED

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

00 JAN 13 AH 9: 48

SEURETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT:	Lisa Ann Polera, P.A.			
		rate name - must include suf	fix)	
			10000309 -01/13/00 *****70.00	-01061010
Enclosed is an origina	al and one(1) copy of the articl	es of incorporation and a	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 CO		
FROM:	Name (Pame (ive		
	Coral Springs, FL		- :	Manan
Lisa Polen	954-752-8007 Daytime T GAVE	elephone number	··	=
ald	bolboss			
M N	OTE: Please provide the or	iginal and one copy of	`the articles.	

45 1/25/2000-

ARTICLES OF INCORPORATION

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Lisa Ann Polera, P.A.

ARTICLE II PRINCIPAL OFFICE

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

C/O Century 21

941 University Drive

Coral Springs, FL 33071

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Lisa A. Polera

941 University Drive

Coral Springs, FL 33071

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Lisa A. Polera

941 University Drive

Coral Springs, FL 33071

Signaturé/Incorporator
ARTICLE VI PURPOSE

The specific purpose is real estate.

x 1-10-00

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated 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 the 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/Registered Agent

K 1-10-00

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