# POOOOOS8484

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

SUBJECT: And	gela Oliva, P.A. (Proposed co	orporate name - must includ	le suffix)		
Englaced is an arising	l and ano(1) come of the orticle	•	500003284 -06/12/00 *****78.75	<b>1875</b> 01079002 ; *****78.7	<b>∃</b> 5
\$70.00 Filing Fee	l and one(1) copy of the article \$78.75 Filing Fee & Certificate	Sof theorporation and a Samuel	\$131.25 Filing Fee, Certified Copy & Certificate		
FROM:	Angela Oliva, P.A	ADDITIONAL CO	PY REQUIRED	2000 SEI TALL	
Name (Printed or typed)				ARY OF STA	
	Weston, FL 33326 City,	6 State & Zip		SS TE NDA	
	Daytime To	elephone number	nk (	6/16	

# ARTICLES OF INCORPORATION

FILED .

2000 JUN 12 MM 9 55

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:

Angela Oliva, P.A.

### PRINCIPAL OFFICE ARTICLE II

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

1389 Harborside Drive Weston, FL 33326

### ARTICLE III SHARES

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

100 shares of common stock at \$1.00 per share par value.

# INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Angela Oliva 1389 Harborside Drive

## Weston, FL 33326 INCORPORATOR ARTICLE V

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

Angela Oliva 1389 Harborside Drive Weston, FL 33326

NATURE OF ASSOCIATION ARTICLE VI

Realtor

(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