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

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SUBJECT: ODD M SAUNDERS, P.A. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)	
Enclosed is 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	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
FROM		SAUNDERS rinted or typed)	TAS	01
	FFENE	24171 41		APR

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

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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be:
TODD M. SAUNDERS P.A.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 555 N.E. 3454 ST.#/60, MIAMI, FL 33137 ARTICLE III PURPOSE The purpose for which the corporation is organized is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is:
LEGAL SERVICES
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): TODD M. SAUNDERS, PRESIDENT, SECRETARY, TREASURER, SILE DIRECTOR 555 N.E. 34D ST., #1610
MIAMI, FL 33137
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: ODD M. SAUNDERS
MIAMI, FC 33137 **********************************
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 us registered agent and agree to act in this capacity
Signature/Registered Agent Top M. SAUNDERS TO LONG TO
Signature/Incorporator TORD M. SAUNDERS Date
CONTINUE AND