Part 4052

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

SUBJECT:	PETER M. DAVIDSON, INC.			F9 3	71
,	(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	APR 30 THE CRETARY OF STATE OF	FILED
Enclosed is an origina	al and one(1) copy of the articl	es of incorporation and a	check for :	_	6
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		₹ .
22035 Martella A Boca Raton, FL 3		rinted or typed) Avenue Address	 	10040931; -05/01/01 -010 *****87.50 **	267 08016 ****87.50
		33433 State & Zip	· ·	-	
	561-289-6925 Daytime T	elephone 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)

ARTICLE I NAME

The name of the corporation shall be:

PETER M. DAVIDSON, INC.



ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

22035 Martella Avenue Boca Raton, FL 33433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Publishing of periodicals, books, feature articles, brochures, photographs, and graphic design, advertising, public relations, and any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100,

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es): Peter Davidson, Director

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

PETER DAVIDSON
22035 Martel Ave.
Boca Raton, FL 33433

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Peter Davidson 22035 Martella Ave. Boca Raton, FL 33433

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Having been named as registered agent to accept service of process f certificate, I am familiar with and accept the appointment as registere	or the above stated corporation at the place designated in this ed agent and agree to act in this capacity
Per vair	4/16/01
Signature/Registered Agent	Date
Por Hair	uliuloi
Signature/Incorporator	Date