## POOCOH424346

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

SUBJECT:	Tracy L. Griffin	7 / A. TE NAME – <u>MUST INCL</u>	UDE SUFFIX)  UDE SUFFIX)  UDE SUFFIX	PR 30 PM 4: 19
Enclosed is an origin	nal and one(1) copy of the article	es of incorporation and a		_
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM	: Tracy L. GN; Name (Pri	finted or typed)		
	5621 14th A	Ve_ So- ddress		terter
	Gulfport, II. City, S	sac & zip	-05/01/ ******7	101857E /0101053018 /0.00 *****70.00
	727-341-22	<b>フマ</b>		

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

Daytime Telephone number

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ARTICLES OF INCORPORATION	. <del>_</del> _
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)  ARTICLE I NAME	FIL 01 APR 30 SECRETAR ALLAHASSI
The name of the corporation shall be: TRACY L. Griffin, P.A.	TARY OF STATE
ARTICLE II PRINCIPAL OFFICE	STA:
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 6621 14th Ave. So.  Gulfport, 71. 33707	DE 9
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: for a Professional C	Corporation
ARTICLE IV SHARES The number of shares of stock is:	·
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):	
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is: 3621 14th Auc.  Gulfport, 71. 33	In Ss. 707
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  The name and address of the Incorporator is:  Gulfport, 71. 33707	
**************************************	lace designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	,
Signature/Registered Agent Date	2, 01
Trang L. Gleffin agril 3	0,01
Signature/incorporator Date	