## POLOCIOS TRANSMITTAL TER

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

& Certified Copy Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Melinda A. Delpech

Name (Printed or typed)

2180 Main Street

Sorasofa FL 34237.

(941) 953 - 977/ Daytime Telephone number

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

7H5/8/01

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

01 MAY -3 PM 2: 20

ARTICLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE TAILAHASSEE, FLORIDA

Melinda A. Delpech, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2180 Main St Sarasaba FL 34237

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Legal services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

Melinda A. Delpech 2180 main St Sansata FC 34237

<u>ARTICLE VI REGISTERED AGENT</u>

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

Molinda A. Delpes Sarason, PL 3423

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

linea A. Delpech 80 Main street sasota FC 34237

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 as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator