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TRANSMITTAL LETTER

FILED

01 AUG 29 PM 2:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

900004562209--0
-08/29/01--01068--022
*****70.00 *****70.00

SUBJECT: Lorraine LaBella Realtor, P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Lorraine LaBella
Name (Printed or typed)

11181 Blythville Rd
Address

Spring Hill FL 34608
City, State & Zip

352-683-5555
Daytime Telephone number

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

C. BLALOCK AUG 30 2001

ARTICLES OF INCORPORATION OF

A Professional Association

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporators, for the purpose of forming a Professional Association under Florida's Professional Service Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE 1: NAME

The name of the Professional Association shall be: Lorraine LaBella Realtor P.A.

ARTICLE 2: PRINCIPAL PLACE OF BUSINESS

The principal place of business of this Professional Association shall be (give *street* address and zip code):

11181 Blythville Rd
Spring Hill FL 34608

ARTICLE 3: SHARES

All stock issued by this Professional Association shall be common voting stock of a single class. The number of shares of stock that this Professional Association is authorized to have outstanding at any time is: tenthousand (10,000)

ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The name of the initial registered agent is Lorraine LaBella
whose registered office is located at the place of business stated in Article 2 above.

ARTICLE 5: PURPOSE AND RESTRICTIONS

The purpose for which the Professional Association is organized is to engage in the licensed practice of real estate business under regulation of the Florida Department of Professional Regulation. No officer, shareholder, employee, or agent shall practice any other occupation on behalf of, or in the name of, this Professional Association, except to the extent allowed by Florida law. No person shall become an officer, shareholder, employee, or agent of this Professional Association who does not possess a license to engage in the same occupation for which this Professional Association is organized except to the extent allowed by law. Should any such person lose the license to so practice, that person shall immediately sever all employment with, and financial interests in, this Professional Association.

ARTICLE 6: INCORPORATORS

The names and street addresses of the incorporators to these Articles of Incorporation are:

Lorraine LaBella, 11181 Blythville Rd, Spring Hill FL 34608

The undersigned incorporators have executed these Articles of Incorporation this 17th
Day of August, ~~20~~ 2001.

Lorraine La Bella
Signature

Signature

Signature

Signature

Signature

Articles of Incorporation
Filing Fee — \$35.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, the undersigned Corporation organized under the laws of the State of Florida submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation/professional association is: _____
Lorraine LaBella Realtor, P.A.

2. The name and address of the registered agent and office is:

Lorraine LaBella
Full name

11181 Blythville Rd
Address (P.O. Box *not* acceptable)

Spring Hill FL 34608
City, State, and Zip

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.

Lorraine LaBella
SIGNATURE OF REGISTERED AGENT

8/24/01
DATE

Designation of Registered Agent
Filing Fee — \$35.00

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TALLAHASSEE, FLORIDA