

P0200005513

TRANSMITTAL LETTER

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

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-01/11/02--01035--009
*****78.75 *****78.75

SUBJECT: TREVA YVONNE LARSON, P.A.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$ 78.75

Filing Fee & Certificate of Status

From:

TREVA LARSON
27290 PRESERVATION ST.
BONITA SPRINGS, FL 34135

(941) 498-3727

FILED
02 JAN 11 PM 2:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

101-16-02
3

ARTICLES OF INCORPORATION

Pursuant to the provisions of section 621, Florida Statutes, the undersigned incorporator(s), for the purpose of forming a professional service corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

TREVA YVONNE LARSON, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

27290 PRESERVATION ST.

BONITA SPRINGS, FL 34135

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

5000 Shares - No Par Common Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TREVA LARSON

27290 PRESERVATION ST.

BONITA SPRINGS, FL 34135

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ARTICLE V INCORPORATORS

The name(s) and street address(s) of the incorporator(s) to these Articles of Incorporation is(are):

TREVA LARSON, President/Secretary

27290 PRESERVATION ST.

BONITA SPRINGS, FL 34135

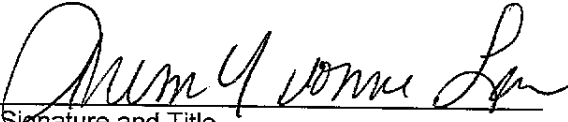
ARTICLE VI NATURE OF BUSINESS

The nature of business shall be:

Real Estate Sales

The undersigned incorporator(s) has(have) executed these articles of Incorporation this

8th day of January, 2002.


Signature and Title

1-8-02
Date

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes, 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 is:

TREVA YVONNE LARSON, P.A.

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

**TREVA LARSON
27290 PRESERVATION ST.
BONITA SPRINGS, FL 34135**

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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.


Signature

1-8-02
Date