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TALLAHASSEE, FLORIDA  
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**TRANSMITTAL LETTER**

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

**SUBJECT:** GAIA GOLDMAN, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** GAIA GOLDMAN  
Name (Printed or typed)

1801 MAIN ST  
Address

SARASOTA, FL 34236  
City, State & Zip

941-587-4935  
Daytime Telephone 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:

GAIA GOLDMAN, P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

1801 MAIN ST, SARASOTA FL 34236

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

REAL ESTATE SALES

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

GAIA GOLDMAN, PRESIDENT, 1732 LAUREL ST, SARASOTA, FL 34236

DAMON GOLDMAN, VICE-PRESIDENT, 1732 LAUREL ST, SARASOTA, FL 34236

**ARTICLE VI REGISTERED AGENT**

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

GAIA GOLDMAN  
1732 LAUREL ST  
SARASOTA, FL 34236


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

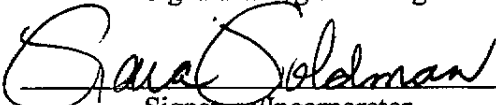
GAIA GOLDMAN  
1732 LAUREL ST  
SARASOTA, FL 34236

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*  
*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

11-21-02  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11-21-02  
Date