

P030000 89743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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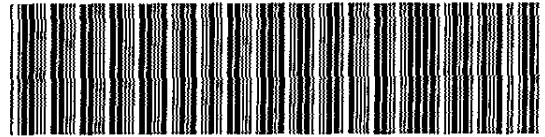
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

SUBJECT: Paralegal At Your Service, Inc.  
(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: Melissa B. Lopretto  
Name (Printed or typed)

9517 Letterstone Court  
Address

Tampa, Florida 33615  
City, State & Zip

(813) 765-1625 / (813) 881-1427  
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:

Paralegal At Your Service, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9517 Letterstone Ct.  
Tampa, Florida 33615

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide Paralegal services to Attorneys in need.

## ARTICLE IV SHARES

The number of shares of stock is:

1,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Melissa B. Lopretto  
President  
9517 Letterstone Court.  
Tampa, FL 33615

## ARTICLE VI REGISTERED AGENT

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

Melissa B. Lopretto  
9517 Letterstone Ct.  
Tampa, FL 33615

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Melissa B. Lopretto  
9517 Letterstone Ct.  
Tampa, FL 33615

\*\*\*\*\*

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

Melissa B. Lopretto  
Signature/Registered Agent

8/1/03  
Date

Melissa B. Lopretto  
Signature/Incorporator

8/1/03  
Date

FILED  
03 AUG 13 PM 3:49  
SECRETARY OF STATE  
TALLAHASSEE, FL 32307