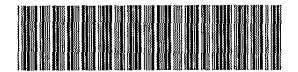
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#### TRANSMITTAL LETTER

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

SUBJECT:(PRO	Laurie Val OPOSED CORPORATE	llett, P.A. E NAME – <u>MUST INC</u>	LUDE SUFFIX)	
Enclosed is an origin	nal and one (1) copy of	the articles of incorpo	pration and a check for:	
☐ \$70.00 Filing Fee & Designation of Registered Agent	& Certificate	Filing Fee	☐ \$87.50 Filing Fee & Certified Copy & Certificate of Status	
	1	ADDITIONAL (	COPY REQUIRED	
FROM: <u>Laurie Vallett, P.A.</u> Name (Printed or typed)  407 – 55 <sup>th</sup> Avenue				
Address  St. Petersburg Beach, FL 33706				
	(727) 360			
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) of Laurie Vallett, P.A.

#### ARTICLE I - NAME

The name of the corporation shall be:

Laurie Vallett, P.A.

#### ARTICLE II - PRINCIPAL OFFICE

The principal place of business/mailing address is:

407 – 55<sup>th</sup> Avenue St. Petersburg Beach, FL 33706

#### ARTICLE III - PURPOSE

The purpose for which the corporation is organized is: To transact any business that a corporation may engage in under the laws of the State of Florida.

Real Estate Sales

#### ARTICLE IV - SHARES OF STOCK

The number of shares of stock is:

100 Shares @ \$1 par value

#### ARTICLE V - INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

Laurie J. Vallett, President/Secretary/Treasurer 407 – 55<sup>th</sup> Avenue St. Petersburg Beach, FL 33706

## **ARTICLE VI - REGISTERED AGENT**

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

Stephen Simone, CPA Stephen Simone, P.A. 6439 Central Avenue St. Petersburg, FL 33710-8411

## ARTICLE VII - INCORPORATOR

The name and address of the Incorporator is:

Laurie J. Vallett 407 – 55<sup>th</sup> Avenue St. Petersburg Beach, FL 33706

The undersigned incorporator(s) h	as(have) executed these A	Articles of Incorporation this
day of CY	ober, 20 <u>03</u> .	
<u>Saure</u> Nam	Sallell ne	10-14-03 Date
Nam	e	Date
Nam		

# 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:

Laurie Vallett, P.A.

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

Stephen Simone, CPA Stephen Simone, P.A. 6439 Central Avenue St. Petersburg, FL 33707

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:

