P03000116536

**					
(Requestor's Name)					
(Address)					
(Address)	-				
(City/State/Zip/Phone #)	-				
PICK-UP WAIT MAIL					
(Business Entity Name)					
	_				
(Document Number)					
Certified Copies Certificates of Status	- .				
Special Instructions to Filing Officer:	1				
	1				

Office Use Only



000023842460

10/16/03--01041--002 **78.75



{v, 20

TRANSMITTAL LETTER

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

SUBJECT: Doct	or Doctor Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	ude suffix)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee. Certified Copy & Certificate of Status PY REQUIRED
FROM: R	obert Taormina		
	Name	(Printed or typed)	
	205 Reserve Place		
		Address	<u></u>
	Celebration, Florida 34747	7	
	City	, State & Zip	
	407 761-9066	Telephone number	
	Dayting	T PERMITTER TENTIFICAT	

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:

Doctor Doctor Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 205 Reserve Place Celebration, Florida 34747

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: website business

ARTICLE IV SHARES

The number of shares of stock is:

200 no par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Robert Taormina 205 Reserve Place Celebration, Florida 34747

ARTICLE VI REGISTERED AGENT

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

Robert Taormina 205 Reserve Place Celebration, Florida 34747

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert Taormina 205 Reserve Place Celebration, Florida 34747

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

Signature/Incorporator

10-14-0

Date

Date