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





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J Nathan Pippin PO Box 462 Okeechobee, FL 34973-0462

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

5/11/2004

SUBJECT: J. NATHAN PIPPIN, P.A.

To Whom It May Concern:

Please find enclosed an original and two (2) copies of the Articles of Incorporation in regards to the above-referenced P.A., and a check for \$87.50 in payment for:

- 1. Filing Fee
- 2. Certificate of Status
- 3. Certified Copy.

J. Hother Report

J. Nathan Pippin

Prepared by: Wes Harvin II

O4 MAY IL DA S. S.

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: J. NATHAN PIPPIN, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3396 NW 34th Ave

Okeechobee, FL 34973-0462

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Appraising and Real Estate

Brokerage Services.

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

NAME	ADDRESS	TITLE
J. Nathan Pippin	PO Box 462 Okeechobee, FL 34973- 0462	President
J. Nathan Pippin	PO Box 462 Okeechobee, FL 34973- 0462	Secretary
J. Nathan Pippin	PO Box 462 Okeechobee, FL 34973- 0462	Treasurer

ARTICLE VI REGISTERED AGENT

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

J Nathan Pippin 3396 NW 34th Ave Okeechobee, FL 34972

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

J Nathan Pippin 3396 NW 34th Ave Okeechobee, FL 34972

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 Date

Meth 15 5-11-2004

Signature/ Michael S-11-2004

Date

DIVISION OF CONSUMATIONS

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