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SECRETARY OF STATE  
DIVISION OF REGISTRATION  
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## TRANSMITTAL LETTER

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

SUBJECT: Central Florida Professional Guardians, 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: Sonia Sanchez

Name (Printed or typed)

P.O. Box 1295

Address

Dade City, Fl. 33526-1295

City, State & Zip

813-714-6489

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:

Central Florida Professional Guardians, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
P.O. Box 1295; Dade City, Fl. 33526-1295

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Professional Guardian

### **ARTICLE IV SHARES**

The number of shares of stock is:  
100

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):  
Sonia Sanchez, President, Vice President, Treasurer, Secretary, Director

### **ARTICLE VI REGISTERED AGENT**

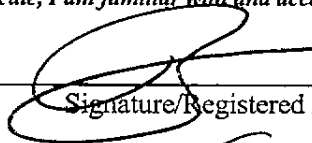
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
John Marshall, 8640 Players Court, Largo, Fl. 37717


### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
Sonia Sanchez, 100 Hampstead Dr., Brooksville, Fl. 34602

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*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

11/03/2004  
Date

11/3/2004  
Date

04 NOV -9 PM 2:32  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS