Florida Department of State Division of Corporations

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FLORIDA PROFIT CORPORATION OR P.A.

Bonnie F. Staskowski, P.A.

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ARTICLES OF INCORPORATION OF

The universigned incorporator(s), for the purpose of forming a Professional Service Corporation under Ci apter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

ARTICUE I NAME

The many of the corporation shall be:

Bonnie F. Staskowski, P.A.

ARTICLE H PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

305 Windmill Palm Avenue Plantation, FL 33324

ARTICLE III PURPOSE

The purpose of this corporation shall be:

used as a professional association of real estate sales and commission

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

500

ARTICLE Y INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Stephen M. Zalka 6437 Nw 99th Avenue Parkland, FL 33076 SECRETARY IF STATE
TALL AHASSEE TLURID

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ARTICLE VI BOARD OF DIRECTOR(S)

The name and address of the initial board of director(s) shall be:

Bonnie F. Staskowski 305 Windmill Palm Avenue Plantation FL 33324

ARTICLE VII OFFICER(S)

The name, title and address of the officer(s) of this corporation shall be:

Bonnie F. Staskowski - President 305 Windmill Palm Ave, Plantation FL 33324

ARTICLE VIII INCORPORATOR(S)

Incorporator Signature

The name and address of the incoporator(s) to these Articles of Incorporation shall be:

Bonnie F. Staskowski 305 Windmill Palm Avenue Plantation FL 33324

The undersigned has (have) executed these Articles of Incorporation this 17thday of December 20 04

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED 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 DUTTES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS RECEPTERED AGENT.

RECISTERED AGENT SIGNATURE

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