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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2005 JAN - 3 A 11:14

FILED

01/03/05--01007--014 \*\*78.75

D. WHITE JAN - 3 2005 M

## TRANSMITTAL LETTER

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

SUBJECT: EVORA PTA, 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: KATTY REYES  
Name (Printed or typed)

620 EAST 7TH STREET  
Address

HIALEAH, FL 33010  
City, State & Zip

(786)897-4344 OR (305)456-1032  
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)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

EVORA PTA, INC.

2005 JAN -3 A 11:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

11223 SW 129 PL. MIAMI, FL 33186

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ARTICLE IV SHARES**

The number of shares of stock is:

100 SHARES @ \$1.00 PER STOCK

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

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

PRESIDENT: ARMANDO EVORA 11223 SW 129 PL. MIAMI, FL 33186

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ARMANDO EVORA 11223 SW 129 PL. MIAMI, FL 33186

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ARMANDO EVORA 11223 SW 129 PL. MIAMI, FL 33186


\*\*\*\*\*

*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

12/30/04

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/30/04

\_\_\_\_\_  
Date