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TRANSMITTAL LETTER

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

SUBJECT: Th	omas Incorvaia, PA (PROPOSED CORPORA)	TÉ NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Thomas Incorvaia	(Printed or typed)		
	14925 SE 25th Avenue	Address		
	Summerfield, Florida 3449		74 12 13 13	37 13
•	City, 3	State & Zip	(1)	
	Daytime Te	elephone number		, to a 1.

NOTE: Please provide the original and one copy of the articles.

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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:

Thomas Incorvaia, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3453 Amelia Avenue The Villages, FL 32162

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional association for the sale of real estate.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Thomas Incorvaia, President/VP/Treas/Sec'y 3453 Amelia Avenue The Villages, FL 32162

ARTICLE VI	REGISTERED AGENT

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

Thomas Incorvaia 3453 Amelia Avenue The Villages, FL 32162

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas Incorvaia 3453 Amelia Avenue The Villages, FL 32162

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

Thomas Acorrais	1/7/2005
Signature/Registered Agent	Date
Than Invaira	1/7/2005
Signature/Incorporator	Date