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(City/State/Zip/Phone #)

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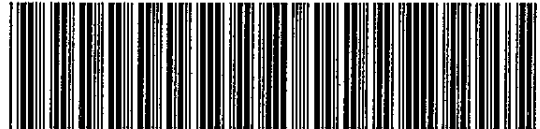
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Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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FEB 28 2005  
FILING OFFICE

05 FEB 28 PM 4:02

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C.F.3-

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

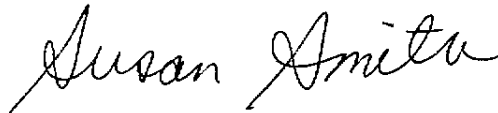
Date 2/23/05

SUBJECT: SUSAN SMITH PA

I have enclosed the original and one copy of the Articles of Incorporation. You will also find my check for \$78.75 to cover the cost of the Filing Fees, Certified Copy of the Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Sincerely,

SUSAN SMITH

A handwritten signature in cursive script that reads "Susan Smith".

Please send accepted Articles of Incorporation to the following address:

SUSAN SMITH, 1616 W CAPE CORAL PKWY. STE 114, CAPE CORAL, FL. 33914

# ARTICLES OF INCORPORATION

SUSAN SMITH PA  
A FLORIDA PROFESSIONAL CORPORATION  
(Pursuant to Chapter 607 and or 621 Florida Statutes)

FILED  
05 FEB 28 PM 4:02  
CLERK OF DISTRICT COURT  
FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

## ARTICLE ONE

The name of the corporation shall be SUSAN SMITH PA

## ARTICLE TWO

The principle office of the corporation is located at 1616 W CAPE CORAL PKWY. STE 114, CAPE CORAL, FL. 33914

## ARTICLE THREE

The purpose for which the corporation is organized is the transaction of any or all-lawful business for which corporations may be incorporated under the Florida Corporation Act and the specific professional purpose below.

All activities associated with and including the sale and marketing of real estate.

## ARTICLE FOUR

The aggregate number of shares of stock which the corporation shall have authority to issue is ONE THOUSAND (1,000) shares of common stock at the par value of one (\$1.00) dollars each.

## ARTICLE FIVE

The street address of its initial registered office is 1616 W CAPE CORAL PKWY. STE 114, CAPE CORAL, FL. 33914 and the name of its initial registered agent at such address is SUSAN SMITH

## ARTICLE SIX

The name and address of the incorporator is:

Name:  
SUSAN SMITH

Address:  
1616 W CAPE CORAL PKWY. STE 114, CAPE CORAL, FL. 33914

The undersigned incorporator has executed these Articles of Incorporation this

DATE 2/23/05 SIGNATURE Susan Smith

ARTICLE SEVEN

The effective date of incorporation shall be the date of filing unless specified below.

ARTICLE EIGHT

The period of its duration is perpetual.

ARTICLE NINE

The number of directors constituting the initial board of directors is ONE, and the name and address of the persons who are to serve as directors until the first annual meeting of the shareholders or until their successors are elected and qualified are:

Name:  
SUSAN SMITH

Address:     --  
1616 W CAPE CORAL PKWY. STE 114,  
CAPE CORAL, FL. 33914

Title  
PRESIDENT

ARTICLE TEN

The Board of Directors is empowered to make, alter or repeal the Bylaws of the corporation without restriction of their powers conferred by statute.

ARTICLE ELEVEN

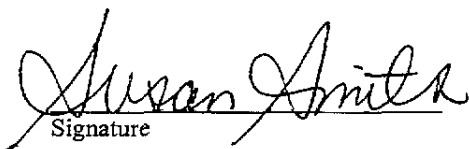
The powers of the incorporator in Article Five of these Articles of Incorporation cease upon the filing of these Articles of Incorporation.

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the Undersigned Corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is SUSAN SMITH PA
2. The names and address of the registered agent and office is: SUSAN SMITH, 1616 W CAPE CORAL PKWY, STE 114, CAPE CORAL, FL. 33914

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent 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 duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
Signature

2/23/05  
Date

SUSAN SMITH  
Print Name

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 FEB 28 PM 4: 02

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