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TRANSMITTAL LETTER

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

SUBJECT: MAURI	CIO GAVIRIA, P.A. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)			
Enclosed are an orig	ginal and one (1) copy of the arti \$78.75 Filing Fee	☑ \$78.75 Filing Fee	\$87.50 Filing Fee,			
	& Certificate of Status	& Certified Copy ADDITIONAL CO	Certified Copy & Certificate of Status PPY REQUIRED			
FROM: MAURICIO GAVIRIA Name (Printed or typed)				J FM	351-	c & da gra "Y" "220"
		Address	· · ·	71		oj 🗓
	305-773-2511	, State & Zip				. 1 <u>24</u> .
	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. (Pro	fit)	
ARTICLE I NAME The name of the corporation shall be:		
MAURICIO GAVIRIA, P.A.		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 4055 NW 97TH AVENUE DORAL, FL 33178		-
ARTICLE III PURPOSE The purpose for which the corporation is organized is: REAL ESTATE ACTIVITIES		
ARTICLE IV SHARES The number of shares of stock is: 100 SHARES		t
ARTICLE V INITIAL OFFICERS AND/OR DIRECT List name(s), address(es) and specific title(s):	TORS	Ċή
MAURICIO GAVIRIA, PRESIDENT 4055 NW 97TH AVENUE DORAL, FL 33178		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptal MAURICIO GAVIRIA 4055 NW 97TH AVENUE DORAL, FL 33178	ole) of the registered agent is:	
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is: MAURICIO GAVIRIA 4055 NW 97TH AVENUE DORAL, FL 33178		, , , , , , , , , , , , , , , , , , ,
**************************************	**************************************	* his
Musicipal	3/29/05	
Signature/Registered Agent	Date	-
frences (2)	3/29/05	
Signature/Incorporator	Date	