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(Address)

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**TRANSMITTAL LETTER**

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

**SUBJECT:** Nancy Steinhart P.A.

**(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Nancy Steinhart

Name (Printed or typed)

5044 N.W. 87 Terrace

Address

Coral Springs, Fl. 33067

City, State & Zip

954-646-5106

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)

### **ARTICLE I NAME**

The name of the corporation shall be:

Nancy Steinhart P.A.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

5044 N.W. 87 Terrace  
Coral Springs, Fl. 33067

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Real Estate Sales

### **ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

Nancy Steinhart - 5044 N.W. 87 Terrace - Coral Springs, Fl. 33067  
Terry Berkowitz - 38 N. Moore Street - New York, N.Y. 10013

### **ARTICLE VI REGISTERED AGENT**

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

Nancy Steinhart  
5044 N.W. 87 Terrace  
Coral Springs, Fl. 33067

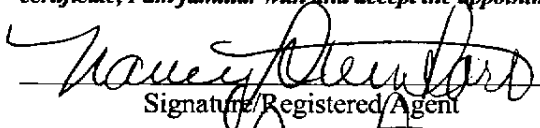
### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Nancy Steinhart  
5044 N.W. 87 Terrace  
Coral Springs, Fl. 3306

\*\*\*\*\*

*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

4/15/05  
\_\_\_\_\_  
Date

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

4/15/05  
\_\_\_\_\_  
Date

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