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TALLAHASSEE, FLOPIDA

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# TRANSMITTAL LETTER

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

SUBJECT: Debr	a Creighton PA				
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	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 PY REQUIRED		
FROM:	Debra Creighton				
Name (Printed or typed)					
-	550 Hattaway Drive				
Alamonte Springs, FL 32701					
City, State & Zip					
-	407 619 3524	Janhona number			
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:

Debra Creighton P.A.

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#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

550 Hataway Drive, Altamonte Springs, FL 32715

#### 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):

Debra Creighton, President 550 Hattaway Drive Altamonte Springs, FL 32701

#### REGISTERED AGENT ARTICLE VI

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

Debra Creighton 550 Hattaway Drive Altamonte Springs, FL 32701

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Debra Creighton 550 Hattaway Drive Altamonte Springs, FL 32701

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

4/26/2005 Date 4/26/2005