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### TRANSMITTAL LETTER

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

UBJECT: DORIAI	(PROPOSED CORP	ORATE NAME – <u>MUST I</u>	NCLUDE SUFFIX)	
aclased are an aria	inal and one (1) copy of th	a artialas afinas marstian	and a shoot four	
closed are an orig	mar and one (1) copy or un	e actions of incorporation	and a check for.	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Cop	& Certificate of	
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	ADDITIONAL COPY REQUIRED			
		Name (Printed or typed)		
_	3308 42 ST SW	Address		
Ţ	EHIGH ACRES FLORIDA			
		City, State & Zip		
:	239-248-9441	<u></u>	D. Rivera	GAYI
<u>-</u>		ime Telephone number	NUTHORIZATION BY PHONE T	O
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		C	DATE 8/23-05	
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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)

FILED

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TALLAHASSEE. FLORIDA

#### ARTICLE I NAME

The name of the corporation shall be:

DORIAN P RIVERA, P.A.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3308 42 ST SW LEHIGH ACRES FLORIDA 33971

#### ARTICLE III PURPOȘE

The purpose for which the corporation is organized is: REAL STATE

## ARTICLE IV SHARES

The number of shares of stock is: 100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DORIAN PRIVERA PRESIDENT

## ARTICLE VI REGISTERED AGENT

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

3308 42 ST SW LEHIGH ACRES FLORIDA 33971

DORIAN P RIVERA

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DORIAN RIVERA

3308 42 ST SW LEHIGH ACRES FLORIDA 33971

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/Incorporator Date