# P05000/17045

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SECRETARY OF STATE TALLAMASSEE, FLORID,

MRD 5/23

# TRANSMITTAL LETTER

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

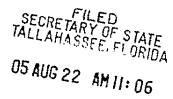
DEVILLO +	ASSOCIALE	s, P.A.				
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status				
FROM: Sharon M. DEVIIIO  Name (Printed or typed)  10871 Ruden Rd.						
W. F-+ . My City	P. S. F	339/7				
	inal and one (1) copy of the art  \$78.75  Filing Fee & Certificate of Status  Sharon  Name  10871  W. F-+. My City	\$78.75 Filing Fee & Certificate of Status  \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO				

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)	SECRETAR TALLAHASS	LED Y OF STATE EE. FLORIDA		
	ARTICLE I NAME  The name of the corporation shall be:  DEVIIO & ASSOCIATES P.A.	05 AUG 22	AM II: 06		
N	ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  10871 RUCEN RCI-  FH MYERS, F1. 33917				
	ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  \$\int_{EA}   \int_{S} + A + E \ SA   \int_{S} And \ PunchAs	·c-			
	ARTICLE IV SHARES The number of shares of stock is:  1,500 Common Shares PAR Value 4.01				
	ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):				
N	Shanon M. DEUillo 1087/ Ruden Rd 1. Fort MyERS, F1 33917-5513				
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:					
	Shanon M. DEVILO 1087/ Rudon Rol N.F+ Myens, F1 33917-5513	ont is.			
	ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:				
	Sharon M. DEVINO 10871 Ruden Red N. Ft. MyERS F1 3 3917-5513	****	****		
	Having been named as registered agent to accept service of process for the above stated corporation certificate, I am familiar with and accept the appointment as registered agent and agree to act in this ca	at the place desig	mated in this		
	Signature/Registered Agent	8/18/	05-		
	NICHARITE/RECUSTERED A CENT	l lata			

Signature/Incorporator

# PAGE 2 DEVILLO & ASSOCIATES, INC.



## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

SHARON M. DEVILLO 10871 RUDEN RD NORTH FORT MYERS, FL 33917-5513

### ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

SHARON M. DEVILLO 10871 RUDEN RD NORTH FORT MYERS, FL 33917-5513

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.

SHARON M. DEVILLO / Registered Agent

Date

SHARON M. DEVILLO /Incorporator

Daté