P05000132846

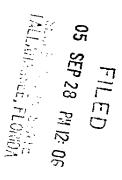
| (Requestor's Name) | | | | |
|--|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| OK PierEmma to | | | | |
| OK PierEmma to Change Article IV to one Share. | | | | |
| to one Share. SH19/29 | | | | |

Office Use Only



400059981394

09/28/05--01017--013 **78.75



0/29/

COVER LETTER

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

| SUBJECT: | MMA BRAUN (PROPOSED CORPOR) | GELLER P.A | • | |
|--|--|---|---|--|
| | ginal and one (1) copy of the art | | | |
| S70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED | |
| FROM: 5 MMA BRAUN KELLER Name (Printed or typed) | | | | |
| | PIDELLAS PARK | | | |
| | 727 - 403- Daytime T | 7297 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: | | | |
| EMMA BRAUN KELLER, | | | |
| ARTICLE II PRINCIPAL OFFICE | | | |
| The principal place of business/mailing address is: | | | |
| 13153 N. DALE MABRY AWY, SUITE 115 | _ | | |
| TAMPA, FL 33618 | FILED SEP 28 PH 12: 06 TALLAMASSEE, FLORIDA | | |
| ARTICLE III PURPOSE | 第五 | | |
| The purpose for which the corporation is organized is: | P2 | | |
| practice of -law | in o | | |
| S Comments | | | |
| ARTICLE IV SHARES | G. R | | |
| The number of shares of stock is: | 57 9 | | |
| one | | | |
| | | | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): | | | |
| | | | |
| ARTICLE VI REGISTERED AGENT | | | |
| The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered | agent is: | | |
| EMMA BRAUN KELLER 5515 110+ AVE. N. #G-201 | | | |
| PINILLAS PARK, FL 33782 | | | |
| 1 (10 (00)) | | | |
| ARTICLE VII INCORPORATOR | | | |
| The <u>name and address</u> of the Incorporator is: | | | |
| EMMA BRAUN HULLER 25Q. 5515 110+4 AVE N. #6-201 | | | |
| PINELLAS PARK, FL 33782 | | | |
| ************************************** | ******* | | |
| 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 | | | |
| E 3 × 00 | el aulac | | |
| Signature/Registered Agent | 7 21 05 Date | | |
| | 1/21/05 | | |
| Signature/Incorporator | Date | | |