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COVER LETTER

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

SUBJECT: Christine Pardo, P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

ed are an ong	mai and one (1) copy of the artic	les of ficorporation and	i 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: C	hristine Pardo	Printed or typed)		SLI	<u>.</u>	
	10905 NW 26 PL			AHA	05 OCT 1	-11
•	Sunrise, FL 33322 City,	Address State & Zip		RY OF	10 PK 1: 06	FILED
	954-383-4091	olonbona numbor			.	,

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:

Christine Pardo, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10905 NW 26th PL. Sunrise, FL 33322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Services

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):

President: Christine Pardo

ARTICLE VI REGISTERED AGENT

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

Doug Williams 7900 Nova DR #203 Davie, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Christine Pardo 10905 NW 26th PL Sunrise FL 33322

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 not in this capacity

Signature/Incorporator

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