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TRANSMITTAL LETTER

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

SUBJECT: CINDY GOLINGER, P.A.

Enclosed are an original and two (2) copies of the articles of incorporation and a check for:

\$87.50 Filing Fee, Certified Copy, and Certificate of Status.

FROM:

CINDY GOLINGER 8135 CASSIA DRIVE

BOYNTON BEACH, FLORIDA 33437

954-461-1497

LED

ARTICLES OF INCORPORATION

05 NOV 21 AM 8: 07

OF

MALAHASSEE, FLORIDA

CINDY GOLINGER, P.A.

The undersigned incorporators, for the purpose of forming a professional association in compliance with Chapter 607 and/or Chapter 621, Florida Statutes (Profit), hereby adopt the following ARTICLES OF INCORPORATION.

ARTICLE I - NAME

The name of the professional association shall be CINDY GOLINGER, P.A.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business/mailing address of the professional association shall be:

8135 CASSIA DRIVE BOYNTON BEACH FLORIDA 33437

<u>ARTICLE III – PURPOSE</u>

The purpose for which the professional association is organized is to provide real estate sales representation services to the general public as allowed by Florida Law.

ARTICLE IV - CAPITAL STOCK

The number of shares of stock that this professional association is authorized to have outstanding at any one time is ONE THOUSAND (1,000) SHARES of common stock without par value.

ARTICLE V - INITIAL REGISTERED AGENT AND ADDRESS

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

CINDY GOLINGER 8135 CASSIA DRIVE BOYNTON BEACH, FLORIDA 33437

ARTICLE VI - INCORPORATOR

The name and address of the incorporator to these ARTICLES OF INCORPORATION is:

CINDY GOLINGER 8135 CASSIA DRIVE BOYNTON BEACH, FLORIDA 33437

ARTICLE VII - AMENDMENTS

This professional association reserves the right to amend or repeal any provisions contained in the Articles of Incorporation, or any amendments thereto, and any right conferred upon the stockholders is subject to this reservation.

The	undersigned	incorporator	has	executed	these	ARTICLES	OF
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Signature & Title

Print Namé

<u>CERTIFICATE OF DESIGNATION</u> REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of Chapter 607 and/or Chapter 621, Florida Statutes, the undersigned professional association, organized under the laws of the State of Florida, submits the following statement in designating the REGISTERED AGENT / REGISTERED OFFICE in the State of Florida.

- 1. The name of the Corporation is CINDY GOLINGER, P.A.
- 2. The name and address of the Registered Agent and Office is:

CINDY GOLINGER 8135 CASSIA DRIVE BOYNTON BEACH, FLORIDA 33437

SIGNATURE Lindy Monager

Corporate Officer,

TITLE MSIDENT

DATE 11-14-05

HAVING BEEN NAMED AS REGISTERED AGENT, and to accept service of process for the above stated professional association at the place designated in this certificate, I AM FAMILIAR WITH AND HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT, and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as REGISTERED AGENT.

SIGNATURE_	Lindy	Mon	agel
	Registered Agent		\sim
DATE	114	4-05	V