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COVER LETTER

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

SUBJECT: David Konchan, P.A.	TE NAME - MUST INCL	HDE SUFFIX)		
(FROI OSED COM ON	THE PARTY OF	<u>googyrris</u> j		
Enclosed are an original and one (1) copy of the art	icles of incorporation and	d a check for:	İ	
Filing Fee 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: David Konchan		SEGI TALL	96	
Name (Printed or typed)			B	n
25 Sugar Mill Lane	Address	Sen .	I T- AWA	
	Address	FLÜNDA	P# 2	
Flagler Beach, FL 32136			2: 24	
City	, State & Zip		-4-	
386-566-2164				
Daytime 1	Felephone 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:

David Konchan, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

25 Sugar Mill Lane, Flagler Beach, FL 32136

PURPOSE ARTICLE III

The purpose for which the corporation is organized is:

Real Estate Broker Associate

ARTICLE IV SHARES

The number of shares of stock is:

1

INITIAL OFFICERS AND/OR DIRECTORS

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

REGISTERED AGENT

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

David Konchan 25 Sugar Mill Lane Flagler Beach, FL 32136

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Konchan 25 Sugar Mill Lane Flagler Beach, FL 32136

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

Ignature/Registered Agent