

FROM: N. J. S. : 3 52 31440 2006 1:21 P1
n of LONDON 83257
Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000160046 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC
Account Number : 120000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

RECEIVED
JUN 19 2006
1:20 PM
P1

FILED

FLORIDA PROFIT/NON PROFIT CORPORATION

STELLA DORMOY, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

10-20-06
407

FROM : LAZARUS

FAX NO. : 3852201440

Jun. 19 2006 01:21PM P2

850-205-0381

8/19/2006 12:09 PAGE 001/001 Florida Dept of State



June 19, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: STELLA DORMOY. P.A.
REF: W06000027738

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Is there a comma after DORMOY or a period in ARTICLE I - NAME. (Illegible)

If you have any further questions concerning your document, please call (850) 245-6933.

Dale White
Document Specialist
New Filing Section

FAX Aud. #: H06000160046
Letter Number: 306A00041102

H06000160046

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

Stella Dormoy, P.A.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7766 S.W. 193rd Lane
Miami, Florida 33157

ARTICLE III - PURPOSE

The purpose of the corporation and its principal activity shall be a real estate agent.

ARTICLE IV - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 shares

ARTICLE V - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Stella Dormoy
7766 S.W. 193 Lane
Miami, Florida 33157

ARTICLE VI - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Stella Dormoy
7766 S.W. 193 Lane
Miami, Florida 33157

H06000160046

FILED
2006 JUN 19 P 1:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FROM : LAZARUS

FAX NO. : 3052201440

Jun. 19 2006 01:21PM P4

Jun 16 06 10:10a

Bill Hall

(305) 259-1903

p.3

H06000160046

ARTICLE VII- DIRECTOR

The name and street address of the director to these Articles of Incorporation is:

Stella Dormoy
7766 S.W. 193 Lane
Miami, Florida 33157

The undersigned incorporator has executed these Articles of Incorporation this 16
day of June, 2006.



Signature

H06000160046

FROM: LAZARUS.

FAX NO. : 3052201440

Jun. 19 2006 01:21PM P5

Jun 16 06 10:10a

Bill Hall

(305) 259-1903

p. 4

H06000160046

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

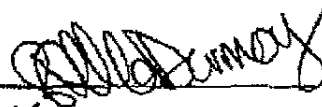
Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: Stella Dormoy, P.A.
2. The name and address of the registered agent and office is:

Stella Dormoy
7766 S.W. 193 Lane
Miami, Florida 33157

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I 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



DATE

6-16-06

FILED

2006 JUN 19 P 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H06000160046