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COVER LETTER

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

SUBJECT:	MICHAEL PO	LLACK, P. F	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	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 PPY REQUIRED	
FROM:		(Printed or typed)		
	BOCK RATON, FL 33496 City, State & Zip			
	954 295-86			

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).

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ARTICLE I NAME:

The name of the corporation shall be: Michael Pollack, P.A.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE:

The principal place of business/mailing address is: 17606 Circle Pond Court, Boca Raton, FL 33496

ARTICLE III PURPOSE:

The purpose for which the corporation is organized is: to provide real estate and related services and any other lawful corporate purpose.

ARTICLE IV SHARES:

The number of shares of stock is: 100 shares of common stock \$1.00 par value per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS:

List the name, address and specific title:

Michael Pollack, 17606 Circle Pond Court, Boca Raton, FL 33496

President and Director

ARTICLE VI REGISTERED AGENT:

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

Michael Pollack

17606 Circle Pond Court, Boca Raton, FL 33496

ARTICLE VII INCORPORATOR:

The name of address of the incorporator is:

Michael Pollack

17606 Circle Pond Court, Boca Raton, FL 33496

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.

Signature Registered Agent

Date

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Signature Incorporator

Date