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Division of Corporations

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Florida Department of State
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To: Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

lisa bortman, p.a.

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**ARTICLES OF INCORPORATION
OF**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LISA BORTMAN, P.A.

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: LISA BORTMAN, P.A.

ARTICLE II DURATION

This corporation shall commence existence upon the date of filing with the Division of Corporations, State of Florida, and shall have perpetual existence.

ARTICLE III PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 9564 CARLYLE AVENUE, SURFSIDE, FL 33154.

ARTICLE IV PURPOSE

The purpose of this corporation shall be: PROPERTY MANAGEMENT & REALTOR.

ARTICLE V CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 share common stock having an individual par value of \$1.00.

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ARTICLE VI INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent: LISA
BORTMAN, 9564 CARLYLE AVENUE, SURFSIDE, FL 33154.

ARTICLE VII BOARD OF DIRECTOR(S)

The name and address of the initial board of directors shall be:

PRESIDENT

LISA BORTMAN

9564 CARLYLE AVENUE
SURFSIDE, FL 33154

ARTICLE VIII INCORPORATOR(S)

The name and address of the incorporator(s) to these Articles of
Incorporation shall be:

EMPIRE CORPORATE KIT OF AMERICA, INC.
2444 NW 7th PLACE
MIAMI, FL 33127

The undersigned has (have) executed these Articles of Incorporation
this 24TH of JULY, 2006.



INCORPORATOR
Ray Stormont Signing for
Empire Corporate Kit of America, Inc.

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

LISA BORTMAN, P.A.

(NAME OF CORPORATION)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO
ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED
CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES
OF INCORPORATION, 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.

Lisa Bortman

REGISTERED AGENT

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TALLAHASSEE, FLORIDA

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