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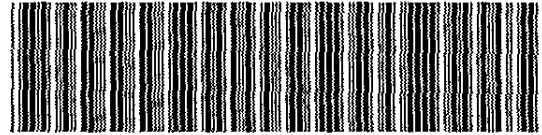
(Business Entity Name)

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DIVISION OF CORPORATIONS
06 AUG 16 AM 8:47

M. Dickey AUG 17 2007

COVER LETTER

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

SUBJECT: Maureen Kamperveen, P.A.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Maureen Kamperveen, P.A.
Name (Printed or typed)

1650 N.W. 59 Way
Address

Sunrise, Fl. 33313
City, State & Zip

954-274-6952
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 15, 2006

MAUREEN KAMPERVEEN, P.A.
1650 N.W. 59TH WAY
SUNRISE, FL 33313

SUBJECT: MAUREEN KAMPERVEEN, P.A.
Ref. Number: W06000036023

We have received your document for MAUREEN KAMPERVEEN, P.A.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50. Your document will be retained in our pending file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6921.

Maryanne Dickey
Document Specialist Supervisor
New Filing Section

Letter Number: 606A00050462

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:

Maureen Kamperveen, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1650 N.W. 59 Way, Sunrise, Fl. 33313

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Maureen Kamperveen, president

Johan E. Kamperveen, vice president

ARTICLE VI REGISTERED AGENT

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

Maureen Kamperveen

1650 N.W. 59 Way, Sunrise, Fl. 33313

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Maureen Kamperveen

1650 N.W. 59 Way, Sunrise, Fl. 33313

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



Signature/Incorporator

8/9/06

Date

8/9/06

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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