706000114686

| (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL |
|---|
| (Address) (City/State/Zip/Phone #) |
| (Address) (City/State/Zip/Phone #) |
| (City/State/Zip/Phone #) |
| (City/State/Zip/Phone #) |
| (City/State/Zip/Phone #) |
| |
| |
| PICK-UP WAIT MAIL |
| |
| |
| (Business Entity Name) |
| (Chambas Line) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



800079314158

09/05/06--01020--018 **78.75

FILED

SECRETARY OF STATE

ALL AHASSEE FLORING

D. WHITE SEP - 5 2006

Date: August 25, 2006

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

| Re: Luis S. Pereira, | P.A |
|---|---|
| | (name of corporation) |
| Gentlemen: | |
| Enclosed please find the original and check in the amount of \$78.75. | one copy of Articles of Incorporation, together |

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

> Very truly yours, Luis S. Pereira, P.A. (name of corporation) MAILING ADDRESS OF CORPORATION 3320 Deltona Blvd

with my

(352) 232-4164

Spring Hill, FL 34606

ARTICLES OF INCORPORATION

FILED

06 SEP -1 PM 4: 46

| | | | of | | 00 2EP - 1 P | M 4: 46 |
|---------------------|--|---------------------------|--|---------------|------------------------|-----------|
| | | LUIS S. PER | EIRA, PA | | SECRETARY O | F STATE |
| | | | corporation) | | TALLAHASSEE | , FLORIDA |
| | subscriber(s) to the st | | ration, natural person(s) co | empetent to c | ontract, hereby form a | |
| The name of the | corporation is: | ARTICLE I - CO | DRPORATE NAME | | | |
| | | LUIS S. PEREIF | RA, PA | | Minimum. | |
| | | ARTICLE I | – DURATION | | | |
| This corporation | shall exist perpetua | ally unless dissolved ac | cording to Florida law. | | | |
| | | ARTICLE I | II – PURPOSE | | | |
| | s organized for the d the State of Florid | | real estate sales activities | as permitted | under the laws of the | |
| | | ARTICLE IV – | CAPITAL STOCK | | | |
| | | | d shares (1000) of | | Dollar(s) (\$ | |
| | | | STERED OFFICE ANI | | | |
| The principal offic | e if known or the | mailing address of the | corporation is: | | | |
| NAME | Luis S. Perei | | Corporation is. | | | |
| ADDRESS | 3320 Deltona | | | 4/ | | |
| CITY | Spring Hill | | FLORIDA | ZIP 3 | 4606 | |
| The name and st | | Initial Registered Agen | t of the Corporation is: | | | |
| NAME | Luis S. Perei | ra | | | | |
| ADDRESS | 3320 Deltona | Blvd | | | | |
| CITY | Spring Hill | | FLORIDA | ZIP 3 | 4606 | |
| | , , , , | | BOARD OF DIRECTO | | | |
| | by the By-Laws, bit are as follows: | ut shall never be less th | e number of directors may I an one (1). The names and | | | |
| NAME | Luis S. Per | reira | | | <u>.</u> | |
| ADDRESS | 3320 Delto | | | | | |
| CITY | Spring Hill | | FLORIDA | ZiP 34 | 606 | |
| NAME | | | | | | |
| ADDRESS | | | | | | |
| CITY | | | | | ZIP | |
| NAME | | | | | | |
| ADDRESS | | | | | 710 | |
| CITY | 01 50 05 11 05 5 | 004704 5405 | DAGE 4 | | ZIP SEMINOLE MIAM | |
| FORM 215: ARTI | ICLES OF INCORP | PORATION, PAGE 1 | PAGE 1 | | SEMINOLE-MIAMI | |

ARTICLE VII - INCORPORATORS

| NAME | Luis S. Pereira | | | |
|---------------------|---------------------------------|--------------------------------|--------------------------------|------------|
| ADDRESS | 3320 Deltona Blvd | | | |
| CITY | Spring Hill | Florida | ZIP 34606 | |
| NAME | _ | | | |
| ADDRESS | | | | |
| CITY | | | ZIP | |
| IN WITNESS day of A | WHEREOF, the undersigned subsci | riber(s) have executed these A | articles of Incorporation this | <u>291</u> |

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

FILED

06 SEP - 1 PM 4: 46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF REGISTERED AGENT

OF

LUIS S. PEREIRA, PA

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

| at <u>3320</u> | <u>Deltona Blvd</u> | |
|-------------------|-------------------------|--|
| Sprin | g Hill, FL 34606 | |
| has named | Luis Pereira | |
| located at the | aforesaid address, as i | ts Registered Agent to accept service of process |
| within this state | е. | |

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)

PAGE 3

SEMINOLE-MIAMI

FORM 215:

CERTIFICATE & ACKNOWLEDGEMENT REGISTERED AGENT