

POB 000128914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

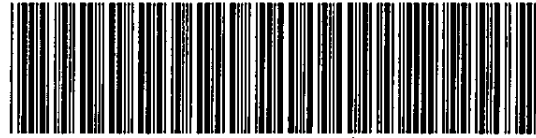
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Joseph Diaz 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: Joseph Diaz
Name (Printed or typed)

18520 N.W. 67th Ave, Suite 166
Address

Hialeah, FL 33015
City, State & Zip

786-277-2893
Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

Joseph Diaz, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

18520 N.W. 67th Ave., Suite 166
Hialeah, FL. 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate / Mortgage Origination

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):

Joseph Diaz - Director
18520 N.W. 67th Ave, Suite # 166
Hialeah, FL. 33015

ARTICLE VI REGISTERED AGENT

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


JAMIE VASQUEZ
6889 NW 179th Street, #101
Hialeah, FL. 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joseph Diaz
18520 N.W. 67th Ave #166
Hialeah, FL. 33015

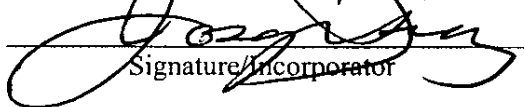
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

10-5-06

Date



Signature/Incorporator

10-5-06

Date

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TALLAHASSEE, FLORIDA