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COVER LETTER

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

_{SUBJECT:} Lenr	nox A. Francis, PA		
	(PROPOSED CORPORA	ATE NAME – MUST INCL	
\$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:	Lennox A. Francis Name (Printed or typed)		
	330 Oak Dr. S. Address cockledge, Fl,32955	<u> </u>	
	City	7, State & Zip 221-213-0864 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:

Lennox A. Francis, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1830 Oak Drive S. Rockledge, FI 32955

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide professional 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):

Lennox A. Francis

ARTICLE VI REGISTERED AGENT

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

Lennox A. Francis 1830 Oak Dr. S. Rockledge, FI 32933

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lennox A. Francis 1830 Oak Dr. S. Rockledge, Fl 32933

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

10/5/2006 Date 10/5/2006

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