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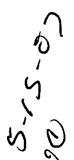
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SECRETARY OF STATE



COVER LETTER

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

SUBJECT: StuartSimonSays, P. A.		
	TE NAME – MUST INCL	
Enclosed are an original and one (1) copy of the article \$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: Stuart Simon		
, Name	(Printed or typed)	
840 Barcelona Drive		
	Address	
Boca Raton, Fl. 33432		
City,	State & Zip	
561-542-8590		
Daytime T	elephone 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: StuartSimonSays, P.A.



The principal place of business/mailing address is: 840 Barcelona Drive, Boca Raton, Fl 33432

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide professional communication consulting services.

ARTICLE IV SHARES

The number of shares of stock is: 100 shres

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Stuart Simon, President, 840 Barcelona Drive, Boca Raton, Fl. 33432

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Tracy Simon, 840 Barcelona Drive, Boca Raton, Fl. 33432

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Stuart Simon, 840 Barcelona Drive, Boca Raton, Fl 33432

Stuart Simon, 840 Barcelona Drive, Boca Raton, Fi 33432	
*****	**********
Having been named as registered agent to accept service of process for the above si certificate, I am familiar with and accept the appointment as registered agent and agr	
	May 6 67
Signature/Registered Agent	May 6 67 Date
Much Line	May 06 2007 Date
Signature/Incorporator	D ate

SECRETARY OF STATE ORION