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SECRETARY OF STATE
TALLAHASSEE, FI OBIG.

c.f.8-21

COVER LETTER

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

SUBJECT: Melis	ssa Johnson, P.A.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00	√ \$78.75	\$78.75	\$87.50
		Filing Fee	Filing Fee,
Filing Fee	Filing Fee & Certificate of Status	& Certified Copy	Certified Copy
	& Certificate of Status	& Certified Copy	& Certificate of
			Status
		ADDITIONAL CO	
		ADDITIONAL CO	PI KEQUIKED
FROM: M	lelissa Johnson		
	Name	e (Printed or typed)	
	5504 NW 112th Place		
		Address	
	Doral, FL. 33178		
		, State & Zip	
	City	, state & Zip	
	305-321-8217		
	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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Melissa Johnson, P.A.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5504 NW 112th Place; Doral, FL. 33178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real estate transactions.

ARTICLE IV SHARES

The number of shares of stock is:

1.000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Melissa Johnson - 5504 NW 112th Place; Doral, FL. 33178 - Chief Executive Officer

ARTICLE VI REGISTERED AGENT

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

5504 NW 112th Place; Doral, FL. 33178

Melissa Johnson

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Melissa Johnson 5504 NW 112th Place Doral, FL. 33178

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

Date

Dignature/Incorporator

Dignature/Incorporator

Dignature/Incorporator