P0800014558

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

Office Use Only

2589.691 WOB-2061D



800125052208

04/23/08--01020--002 ++78.75

OR MAY -2 PM Is: 02

of 5/2/08

COVER LETTER

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

08 MAY -2 PM 4: 02

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

SUBJECT: CHRISTINE S. SOVIERO, INC.					
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)					
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
\$70.00	\$78.75	578.75	\$87.50		
Filing Fee		Filing Fee	Filing Fee,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
			Status		
		ADDITIONAL CO	PPY REQUIRED		
	1				
FROM: CHRISTINE S. SOVIERO, INC.					
Name (Printed or typed)					
5815 NW 120TH TERRACE					
Address					
CORAL SPRINGS, FL 33076					
City, State & Zip					
	954-326-7600				
Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.



SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY -2 PM 4: 02

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 23, 2008

CHRISTINE S. SOVIERO INC. 5815 NW 120TH TERRACE CORAL SPRINGS, FL 33076

SUBJECT: CHRISTINE S. SOVIERO, INC.

Ref. Number: W08000020610

We have received your document for CHRISTINE S. SOVIERO, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 308A00024542

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE DIVISION OF CORPORATIONS

08 MAY -2 PM 4: 02

ARTICLE I NAME

The name of the corporation shall be:

CHRISTINE S. SOVIERO, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5815 NW DO JUNAIL Coral Spring, FL 33016 ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EDUCATIONAL CONSULTANT

ARTICLE IV SHARES

The number of shares of stock is:

<u> ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS</u>

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

ARTICLE VI REGISTERED AGENT

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

CHRISTINE S. SOVIERO 5815 NW 120TH TERRACE CORAL SPRINGS, FL 33076

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: CHRISTINE S. SOVIERO

5815 NW 120TH TERRACE CORAL SPRINGS, FL 33076

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

Ctat	4-18-08
Signature/Registered Agent	Date
CZul	4-18-08
Signature/Incorporator	Date