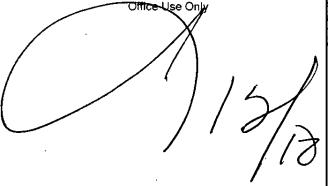
POSODO DA HOD

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	: #)		
PICK-UP	MAIT WAIT	MAIL MAIL		
(Business Entity Name)				
. (Do	cument Number)			
Certified Copies		of Status		
Special Instructions to Filing Officer:				
		į		
		İ		
		<u>_</u>		





500139047895

12/18/08--01013--006 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

利比 08 DEC 18 PM 3: 4.1

COVER LETTER

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

SUBJECT: McVisor	ry Associates, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: W	illiam McKenna		
	Name 800 Hampton Court	(Printed or typed)	,
		Address	
	Weston, FL 33326	State & Zip	
	954-384-7665 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:

McVisory Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1500 Weston Road- Suite 218 Weston, FL 33326

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting Services

ARTICLE IV SHARES

The number of shares of stock is: Two (2)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): William McKenna- President 1500 Weston Road- Suite 218, Weston, FL 33326

Myra McKenna- Secretary/Treasurer 1500 Weston Road- Suite 218, Weston, FL 33326

ARTICLE VI REGISTERED AGENT

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

William McKenna 1500 Weston Road- Suite 218 Weston, FL 33326

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Myra McKenna 1500 Weston Road- Suite 218 Weston, FL 33326

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

Signature/Incorporator

Date

1.

Date

OB DEC 18 PM 3: L