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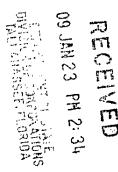
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CORPORATION NAME(S) & DOCUM	, •
•	LIZZETTE M. Francisco, P.
2. (Corporation Name)	(Document #)
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OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials

APPROVE AND FILED

ARTICLES OF INCORPORATION OF

09 JAN 23 PM 12: 29 SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be: LAW FIRM of Lizzette M. FRANCISCO, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8227 S.W. 84th ct. Miami, Fl. 33143

ARTICLE III PURPOSE

The purpose of this corporation shall be:

law practice

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

100

ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Lizzette M. FRANCISCO 8227 S.W 84th Ct. Miami, F1 33143

ARTICLE VI BOARD OF DIRECTOR (S)

The name and address of the initial board of director(s) shall be:

Lizzette M. Francisco 8227 SW 84th Ct. Miami, F1. 33143

ARTICLE VII OFFICER (S)

The name, title and address of the officer(s) of this corporation shall be:

Lizzette H. Francisco President 8227 S.W. 84th Ct. Uiami, Fl. 33143

ARTICLE VIII INCORPORATOR (S)

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

Lizzette M. Francisco 8227 SW 84th Ct. Miami, Fl. 33/43

Incorporator Signature

APPROVE: AND FILED

09 JAN 23 PM 12: 25

SECRETARY OF STATE FALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

RECESTERED AGENT SIGNATURE