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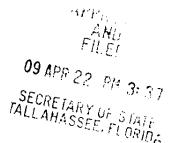


COVER LETTER

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

SUBJECT: SCOTT	MARTIN, INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	JUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: MU	JRRAY J COHEN PA		
	Name	(Printed or typed)	
	10330 CAMELBACK LANE	Address	
	BOCA RATON, FL 33498 City,	State & Zip	
	561-482-8682 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:

SCOTT MARTIN, INC

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 5545 AMERICAN CIRCLE

DELRAY BEACH FL., 33484

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE SALES & SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): SCAOTT MARTIN PRES 5545 AMERICAN CIRCLE DELRAY BEACH, FL. 33484

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: MURRAY J COHEN PA 10330 CAMELBACK LANE BOCA RATON FL., 33498

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: MURRAY COHEN 10330 CAMELBACK LANE BOCA RATON FL., 33498

Isla & A.	04/19/09
Signature/Registered Agent	Date
~ Theleh	04/19/09
Signature/Ingorporator	Date