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COVER LETTER

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

SUBJECT:	CHOOSE YOUR LAWYER, INC.		
	(PROPOSED CORPORA	TE NAME - MUST INCL	_
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Status
FROM:	Name	es P. Gitkin (Printed or typed)	
	Fort Lauderd	Address Vale, Florida 33301 State & Zip	
	(954)	217-6297 elephone number	
	jim@salp E-mail address: (to be used	etergitkin.com I for future annual report i	notification)

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:

Choose Your Lawyer, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 1900 Glades Road - Suite 357 Boca Raton, Florida 33134

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

100 shares authorized

INITIAL OFFICERS AND/OR DIRECTORS

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

Susan Peroff

1900 Glades Road - Suite 357

Boca Raton, Florida 33134

ARTICLE VI REGISTERED AGENT

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

Susan Peroff

1900 Glades Road - Suite 357

Boca Raton, Florida 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Susan Peroff

1900 Glades Road - Suite 357

Boca Raton, Florida 33134

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 10-21-09