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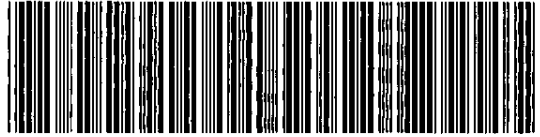
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NR

COVER LETTER

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

SUBJECT: THE BLAKE LAW GROUP, P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Cary Blake

Name (Printed or typed)

1075 Broken Sound Pkwy NW Ste 102

Address

Boca Raton, FL 33487

City, State & Zip

305-778-9308

Daytime Telephone number

cary@blakelawgroup.com

E-mail address: (to be used for future annual report 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:

The Blake Law Group, P.A.

ARTICLE II PRINCIPAL OFFICE

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

Principle: 1075 Broken Sound Pkwy Ste 102, Boca Raton, FL. 33487
**mailing: P.O. Box 600277 N. Miami Beach, FL. 33160*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Legal Services/Law Firm

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Cary Blake - President
P.O. Box 600277, N. Miami Beach FL. 33160

ARTICLE VI REGISTERED AGENT

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

Cary Blake, Esq.
1075 Broken Sound Pkwy Ste 102, Boca Raton, FL 33487

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cary Blake
1075 Broken Sound Pkwy. Ste 102
Boca Raton, FL 33487

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]

Signature/Registered Agent

[Signature]

Signature/Incorporator

Cary Blake

12/29/09
Date

12/29/09
Date

FILED
10 JAN -4 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA