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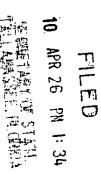
(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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

SUBJECT: Michae	el W. Olsen P.A.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	
FROM: <u>M</u>	ichael W. Olsen Name	e (Printed or typed)	
75	540 SW 59th Court Apartment # 25		
		Address	
So	outh Miami, Florida, 33143 City.	State & Zip	
	•	Suite to Esp	
30	5-588-5608 Daytime T	elephone number	
mil	ke.w.olsen@gmail.com		
		d 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:

Michael W. Olsen P.A.

ARTICLE II PRINCIPAL OFFICE

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

7540 SW 59th Court Apt. #25 South Miami, Florida, 33143

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide legal services

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):

Michael Olsen

7540 SW 59th street, Director South Miami Florida.

33143 APT. # 25

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: Michael Olsen

7540 SW 59th Court Apt. # 25 South Miami, Florida, 33143

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Olsen

7540 SW 59th Court Apt. #25

South Miami, Florida, 33143

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

Miler Constitution Advisor Agent Agent Date

Miler Constitution Date

Signature/Incorporator Date



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