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COVER LETTER

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

SUBJECT:	The Riley Firm, P.A.
	(PROPOSED CORPORATION – MUST INCLUDE SUFFIX)
Enclosed are	an original and one (1) copy of the articles of incorporation and a check for:
	\$78.75 Filing Fee & Certificate of Status
FROM:	Donna Riley, Esq.
	Name (printed or typed)
	P.O. Box 600523
	Address
	North Miami Beach, FL 33160
	City, State & Zip
	(305) 606-1275
	Daytime Telephone number
	drileylaw@yahoo.com
	E-mail address (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

- 12/19/10

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation is: The Riley Firm, P.A.

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ARTICLE II PRINCIPAL OFFICE

The principal street address is: 1805 Sans Souci Blvd., #130 North Miami, Florida 33181

The mailing address, if different: P.O. Box 600523 North Miami Beach, Florida 33160

ARTICLE III NATURE OF BUSINESS

The purpose of this corporation is to transact any and all lawful business activities, engage in the practice of law and related services as permitted under the laws of the United States of America, the State of Florida, any other state, territory and nation.

ARTICLE IV SHARES

The authorized shares are 100.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Donna Riley, Esq. P.O. Box 600523 North Miami Beach, Florida 33160

ARTICLE VI REGISTERED AGENT

The name and Florida Street address (P.O. Box NOT acceptable) of the registered agent is: InCorp Services, Inc.
17888 67th Court North
Loxahatchee, Florida 33470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Donna Riley, Esq. P.O. Box 600523 North Miami Beach, Florida 33160

ARTICLE VIII EFFECTIVE DATE OF PROFESSIONAL ASSOCIATION

The effective date of this corporation is December 19, 2010.

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.

Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided §817.155, F.S.

Required Signature/Incorporator

D-40