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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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Special Instructions to Filing Officer:						
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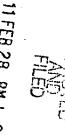
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COVER LETTER

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

SUBJECT: VERONICA CHAVEZ, P.A.							
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)							
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:						
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED						
	1 n d "ln" - 2						
FROM: VERONCIA CHAVEZ							
Name	(Printed or typed)						
4961 23RD AVE SW							
Address							
NAPLES, FL 34116 City,	State & Zip						
<u>239-465-5034</u>							
Daytime Telephone number							
vchavez123@gmail.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 complia	ince with Chapter 60	7 and/or Cha	pter 621, F.S.	(Profit)	似形
ARTICLE I The name of the cor	NAME poration shall be:	VERONICA C	HAVEZ, F	P.A.	11 FER	28 PM 4: 25
49	PRINCIPAL OFFIC Principal street at 961 23RD AVE SV APLES, FL 34116	ldress V		Mail 5419 23RD NAPLES, F	ing add SECFILE	Merent is:
ARTICLE III I						
	ich the corporation is L LAWFUL BUS		NING TO	REAL EST	ATE SALES	S AND SERVICES
ARTICLE IV The number of share	SHARES es of stock is: 100	0				s
ARTICLE V	INITIAL OFFICER	S AND/OR DIREC	CTORS			
Name and Tit	le: <u>VERONICA CH</u>				 -	
Address:	4961 23rd AVE	SW	Addr	ess:		
	NAPLES, FL 3	4116	<u>.</u>		· · · · · · · · · · · · · · · · · · ·	
Name and Tit Address:	le:			e and Title:		
Name and Tit Address:	•		Addr			
	REGISTERED AGE ida street address (P.C VERONICA C 4961 23RD A NAPLES, FL	D. Box NOT acceptal HAVEZ VE SW	ble) of the regi	istered agent is:		
ARTICLE VII	INCORPORATOR					
	ess of the Incorporator	is:				
Name:	VERONICA C					
Address:	4961_23RD_A\	/E.SW				
this certificate, I am	NAPLES, FL. I as registered agent to familiar with any acco	o accept service of p	rocess for the as registered a	e above stated agree	e to act in this c	
_1/901460.	[/////	8			2/23/	2011
1	Required Signa	ture/Registered Agen	t			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 for in s.817.155, F.S.

Required Signature/Incorporator

2/23/2011

Date