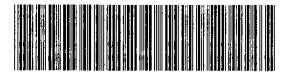
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(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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MRD 3/15

COVER LETTER

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

SUBJECT: Monal Oza Zipper, 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 & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED		
	ADDITIONAL CO	OF FREQUIRED		
FROM: Monal Oza Zipper Name (Printed or typed)				
4260 NE 22 Terrace				
Address				
Lighthouse Point, Florida 33064 City, State & Zip				
305-505-2028 Daytime Te	elephone number			
zipperlaw@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 compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

4000000	1		
The name of the corp	Monal Oza Zipper, P.A.		11 MAR PM 12: 0
·			"MAR II DU m
ARTICLE II	PRINCIPAL OFFICE		SERRE-
40	Principal street address	Mailing	address, af different is Y OF STAR
	260 NE 22 Terrace		- TATE LORINA
	Jilliouse rollii, rt 5,5064		
		El El	FECTIVE DATE_3/7/11
ARTICLE III P			7 7
	ich the corporation is organized is: in the practice of law as a profession:	al law corporation	and to corn, an agnises
	practice of law.	ai iaw corporation	and to carry on services
	perty, enter into contracts, and to car	ry on any hueinee	s nocessary or incidental to
the accomplish	nment or furtherance of the purposes	of this corporation	s necessary or incidental to
the accomplish	ment of lattherance of the purposes	or triis corporation	1.
ARTICLE IV	SHARES		
The number of share	s of stock is: This corporation shall have the a		
ARTICLE V	one single class, and shall have		ent.
Name and Titl	NITIAL OFFICERS AND/OR DIRECTORS		
Address:	Monal Oza Zipper, Esq President	Address:	
	4260 NE 22 Terrace		
	Lighthouse Point, FL 33064		
Name and Titl	e:	Name and Title	
Address:	·	Address:	
Name and Titl	e:	Name and Title:	
Address:	Y		
ARTICLE VI	REGISTERED AGENT		
	da street address (P.O. Box NOT acceptable) of t	he registered agent is:	
Name:	Monal Oza Zipper, Esq.	-	
Address:	4260 NE 22 Terrace		
	Lighthouse Point, FL 33064		
ARTICLE VII I	NCORPORATOR		
	ess of the Incorporator is:		
Name: Address:	Monal Oza Zipper, Fsq.		
Audress:	4260 NE 22 Terrace Lighthouse Point, FL 33064		
Having been named	as registered agent to accept service of process	for the above stated coi	poration at the place designated in
this certificate, I am	familiar with and accept the appointment as regis	tered agent and agree to	act in this capacity
(XV)			3/10/11
	Require Signature/Registered Agent		Date .
\ V			
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 Dep	artment of State constitutes a third degree felony	as provided for in s.817.	155, F.S.
(/	711×0		0/4.0/4.4
	Required Senature/Incorporator		3/10/11 Date
	requires population moon polator		Date

ARTICLES OF INCORPORATION FOR MONAL OZA ZIPPER, P,A.

ARTICLE VIII EFFECTIVE DATE

These Articles of Incorporation shall be effective as of Monday, March 7, 2011.

MONALOZA ZIPPER, ESQ.

THRI PHE: 10