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11 JUN 17 PN to 30
SECRETARY OF SIVE
FARLANASSES FOR SIVE

N 06/20/11

## **COVER LETTER**

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

SUBJECT: Listen IN Incorporated				
(PROPOSED CORPORATE  Enclosed are an original and one (1) copy of the artic				
\$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		
FROM: Yvette Duran Someillan Name (Printed or typed)				
3431 SW 107 Ave	ddress			
Miami FL 33165 City, 5	State & Zip			
305-551-7222  Daytime Telephone number				
nghc@bellsouth.net E-mail address: (to be used	for future annual repor	t 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 The name of the corp	NAME  Listen IN Incorporate poration shall be:	red		
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address	Mailing ad	dress, if different is:	
34	31 SW 107 Ave		, 	
	ami FL 33165			
ARTICLE III F			growt).	
	ich the corporation is organized is:		A	
Professional (	Corporation		C_ C	
			40. A MILE.	
			Co.	
ARTICLE IV				
The number of share	s of stock is: IUU			
APTICI P V	INITIAL OFFICERS AND/OR DIREC	TOPS	# 30 TATE ORIDA	
	le:Yvette Duran Someillan. PRES			
Address:	10966 SW 28 St.			
Addiess.	Miami FL 33165			
	Wildliff L. 33 103			
Name and Tit	les lesent V Duren , Pare	Name and Title		
Name and Tit	le: Joseph K. Duran, PRES. 10444 SW 21 TQ.	Address:		
Address.	Miami FL 33165	Aduless.		
	MIAITIFE 33 103		<del></del>	
Name and Tit	le:	Name and Title:		
Address:	ic.			
Address.	-	Address.		
	REGISTERED AGENT			
	ida street address (P.O. Box NOT acceptate	ale) of the registered agent is:		
Name:	Yvette Duran Someillan			
Address:	3431 SW 107 Ave			
	Miami FL 33165	<del></del>		
		<del></del>		
ARTICLE VII	<u>INCORPORATOR</u>			
The name and add	ress of the Incorporator is:			
Name:	Yvette Duran Someillan	· · · · · ·		
Address:	3431 SW 107 Ave			
	Miami FL 33165	<del>,,</del>		
	d as registered agent to accept service of p familiar with and accept the approintment of		ct in this capacity	
	Monuel		6/13/11	
	Recuired Signature/Registered Agen	t	'Date	
	nent and affirm that the facts stated herei partment of Stafe constitutes a thirth degree			
•	(X, Y)	•		
	Tomer		6//3/11	
	Required Signature/Incorporator		Date	