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COVER LETTER

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

SUBJECT: Nicole Testa Mehdipour, Trustee, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:			
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED			
FROM: Nicole Testa Mehdipour, President Name (Printed or typed) 101 N.E. Third Avenue, Suite 2000 Address				
Fort Lauderdale, FL 33301 City, State & Zip				
(954) 858-5880 Daytime To	elephone number			
billing@ntmlawfirm.com E-mail address: (to be used for future annual report notification)				

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

			ies (.
t	ARTICLES OF INCO In compliance with Chapter 607 and/		SECRETAL D
ARTICLE I The name of the co	Nicole Testa Mehdipour,	Trustee, Inc.	SECRETARY OF
5	PRINCIPAL OFFICE Principal street address 101 East Las Olas Blvd. Suite 130-457 Fort Lauderdale, FL 33301	N	SECRETARY OF STATE Mailing address, if different is:
Generally to attaining any exercise any	hich the corporation is organized is: make and perform contracts of any kir of the objectives of the corporation, to and all powers, and which now are or form any and all things necessary or in erein. SHARES	do and perfo hereafter ma	orm any other act or thing, and to y be authorized by law, and
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTORS	5	
	tle: Nicole Testa Mehdipour, President 401 East Las Olas Blvd. Suite 130-457 Fort Lauderdale, FL 33301	Name and Title: Address:	
Name and Ti	itle:		
Address:		Address:	
Name and Ti Address:	itle:		
4 D. W. C. T. T. T.			
	REGISTERED AGENT rida street address (P.O. Box NOT acceptable) of Law Office of Nicole Testa Mehdipour, P 101 NE Third Avenue, Suite 200 Fort Lauderdale, FL 33301	A	t is:
ARTICLE VII	INCORPORATOR		
The <u>name and add</u>	Iress of the Incorporator is:		
Name: Address:	Nicole Testa Mehdipour, Truste 401 East Las Olas Blvd., Suite 130-45 Fort Lauderdale, FL 33301		
this certificate, I an	ed as registered agent to accept service of process n familiar with and accept the appointment as regis		
Much	de Melodyson		7/26/11
	Required Signature/Registered Agent	 	Date
document to the De	ment and affirm that the facts stated herein are repartment of State constitutes a third degree felony		that the false information submitted in a
/ nes	de Mahdyans		7/26/11
	Required Signature/Incorporator		Date