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COVER LETTER

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

SUBJECT: SMITH & BARQUINERO, 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:

- [x] $70.00 Filing Fee
- [ ] $78.75 Filing Fee & Certificate of Status
- [ ] $78.75 Filing Fee & Certified Copy
- [ ] $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: ENRIQUE BARQUINERO
Name (Printed or typed)

1616 JORK ROAD, SUITE 302
Address

JACKSONVILLE, FL 32207
City, State & Zip

904-374-4445
Daytime Telephone number

ENRIQUE@SMITH-BARQUINERO.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)

ARTICLE I NAME
The name of the corporation shall be: SMITH & BARQUINERO, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1616 JORK ROAD, SUITE 302
JACKSONVILLE, FL 32207

Mailing address, if different is:

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ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
LAW FIRM.

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ENRIQUE BARQUINERO, PRES.
Address: 1616 JORK ROAD, SUITE 302
JACKSONVILLE, FL 32202

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT
The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:
Name: ENRIQUE BARQUINERO
Address: 1616 JORK ROAD, SUITE 302
JACKSONVILLE, FL 32207

ARTICLE VII INCORPORATOR
The **name and address** of the Incorporator is:
Name: ENRIQUE BARQUINERO
Address: 1616 JORK ROAD, SUITE 302
JACKSONVILLE, FL 32207

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: 01/11/12

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 — Date: 01/11/12