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COVER LETTER

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

SUBJECT: Law Office of Hector Hernandez Jr., 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 \$87.50 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Attorney Hector Hernandez Jr., P.A. Name (Printed or typed) 4524 Curry Ford Road #300 Address Orlando, Florida 32812 City, State & Zip 407 374 - 8475 Daytime Telephone number

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

hectorhernandezattorneyatlaw@gmail.com
E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the co	NAME Law Office of Hector H reporation shall be:	iemanuez st., r.A.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal street address		address, if different is:
	33 Lee Road, Suite 350		ord Road #300
2	Orlando, Florida 32810	Orlando, Flori	da 32812
ARTICLE III The purpose for wheel Provide Lega	hich the corporation is organized is:		
J			
ARTICLE IV The number of shar			
	INITIAL OFFICERS AND/OR DIRECTO		
Name and Ti Address:	Hector Hernandez Jr., President 4524 Curry Ford Road #300	Address:	
	Orlando, Florida 32812		
	tle:		
Address:			
	ıle:		
Address:			
ARTICLE VI	REGISTERED AGENT		
	rida street address (P.O. Box NOT acceptable)	of the registered agent is:	TALS 2
Name:	Attorney Hector Hernandez Jr.		1
Address:	933 Lee Road, Suite 350 Orlando, Florida 32810		FEB TANKETY AND
ADTIOL P. IIII	·		10 SSE
	INCORPORATOR ress of the Incorporator is:		79
Name:	Attorney Hector Hemandez Jr		五 王 山
Address:	4524 Curry Ford Road, #300 Orlando, Florida 32812		73. C
Havine been name	d as registered agent to accept service of proce	ess for the ahove stated com	poration at the place designated i
this certificate, I an	n familiar with and accept the appointment as re	egistered agent and agree to	act in this capacity
\mathcal{N}_{ϵ}	ut al earl		02/07/2012
	Required Signature/Registered Agent		Date
I submit this document to the Do	nent and affirm that the facts stated herein a partment of State constitutes a third degree felo	re true. I am aware that the	e false information submitted in (
		es provincia por un s.017.1	t.d.Jg
/-le	Required Signature/Incorporator		02/07/2012
	Required Signapare/Incorporator		Date