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| _ Certificates                          | of Status  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
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## **COVER LETTER**

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

| Tallallassee, PL 323 | 714                             |                             |                     |
|----------------------|---------------------------------|-----------------------------|---------------------|
| SUBJECT: Juc         | ly-Ann Smith La                 |                             |                     |
|                      | (PROPOSED CORPORA               | ATE NAME – <u>MUST INCL</u> | <u>ude suffix</u> ) |
| Enclosed are an orig | inal and one (1) copy of the ar | ticles of incorporation and | l a check for:      |
| \$70.00              | <b>\$78.75</b>                  | \$78.75                     | □ \$87.50           |
| Filing Fee           | Filing Fee                      | Filing Fee                  | Filing Fee,         |
|                      | & Certificate of Status         | & Certified Copy            | Certified Copy      |
|                      |                                 |                             | & Certificate of    |
|                      |                                 |                             | Status              |
|                      |                                 | ADDITIONAL CO               | PY REQUIRED         |
|                      |                                 |                             |                     |
|                      |                                 |                             |                     |

| FROM:      | Judy-Ann Smith, Esq.  |
|------------|---|
| _          | Name (Printed or typed)   |
| 2          | 2881 East Oakland Park Boulevard, Suite 421   |
| <u></u>    | Address   |
| F          | Fort Lauderdale, Florida 33306.   |
| _          | City, State & Zip   |
| ξ          | 954-303-8605  |
|            | Daytime Telephone number  |
| <u>j</u> ز | udsatty@gmail.com  E-mail address: (to be used for future annual report notification) |
|            | E-mair 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 NAM The name of the corporat       | Eion shall be: Judy-Ann Smith La                            | aw Firm, P.A.                                |              |
|--|---|--|--------------|
| ARTICLE II PRII                              | NCIPAL OFFICE Principal street address Kland Park Boulevard | Mailing address, if different is:            |              |
| Suite 421                                    |   |  | <del></del>  |
| Fort Lauderda                                | lle, FL 33306   |  |              |
| ARTICLE III PUR<br>The purpose for which the | POSE he corporation is organized is:  Attorne               | ey at Law                                    |              |
|  |   |  |              |
| ARTICLE IV SHA The number of shares of       |   | <b>2</b> 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | ]<br>}       |
| Name and Title                               | Judy-Ann Smith, Esq President                               | Name and Tipe:                               |              |
| Address                                      | 2881 East Oakland Park Boulevard,                           | Address:                                     | i<br>        |
|  | Suite 421 Fort Lauderdale, FL 33306.                        |  | <u> </u>     |
| Name and Title:                              |   | Name and Title:                              |              |
| Address                                      |   | Address:                                     | <del></del>  |
|  |   |  | <del>-</del> |
| Name and Title:                              |   | Name and Title:                              |              |
| Address                                      |   | Address:                                     |              |
|  |   | <del> </del>                                 |              |

| Name an                         | d Title:   | Name and Title:   |
|---------------------------------|--|---|
| Address                         |  | Address:  |
| ARTICLE VI The name and F Name: | REGISTERED AGENT<br>lorida street address (P.O. Box NOT acceptable) of<br>Judy-Ann Smith   | f the registered agent is:  |
| Address:                        | 2881 East Oakland Park Boulevard, Suite 421  |   |
| Addiess.                        | Fort Lauderdale, FL 33306.   |   |
| ARTICLE VII                     | INCORPORATOR  Idress of the Incorporator is:   | A 3   |
| Name:                           | Judy-Ann Smith   |   |
| Address:                        | 2881 East Oakland Park Boulevard, Suite 421  | 3: 0:<br>Oriote<br>Oriote   |
| riduicas.                       | Fort Lauderdale, FL 33306.   | . <b>&gt;</b> 31  |
|                                 | ned as registered agent to accept service of process am familiar with and accept the appointment as reg  Required Signature/Registered Agent |   |
|                                 |  |   |
|                                 | ument and affirm that the facts stated herein are<br>Department of State constitutes a third degree felon                                    | true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S. |
| 1                               | Required Signature/Incorporator  | May 28, 2013  |
|                                 |  |   |