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Florida Department of State
Division of Corporations
Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
NORA A. HUEPPI P.A.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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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: NORA HUEPPI P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1043 BRICKELL AVE

APT 2002

MIAMI FL 33129

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NORA A. HUEPPI (PRESIDENT)

Address 1043 BRICKELL AVE

APT: 2002

MIAMI FL 33129

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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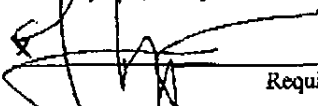
ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: NORA A. HUEPPI
Address: 1043 BRICKELL AVE APT 2002
MIAMI FL 33129

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

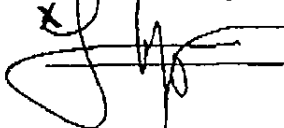
Name: NORA A. HUEPPI
Address: 1043 BRICKELL AVE APT 2002
MIAMI FL 33129

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

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

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