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COVER LETTER

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

SUBJECT: Maria-Stella Emura, P.A. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)						
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:			
\$70.00 Filing Fee	Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,			
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status			
	ADDITIONAL COPY REQUIRED					
		_				
FROM:	Maria-Stella E	E (Printed or typed)				
4208 Madeira Court						
Sarasota, FL 34233 City, State & Zip						
<u></u>	941-914-52 Daytime T	282 Telephone number				
	marieste. e	MUYA @ GMC ed for future annual report	qil. Com notification)			

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

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

The name of the corpor	AME ration shall be:	Maria - S	Stella En	oura, P.A.	
4208 M	INCIPAL OFFICE Principal street add adeira C A FL 3	dress 		Mailing address, if di	ifferent is:
ARTICLE III PUT The purpose for which	RPOSE the corporation is or	ganized is:	Real Est	ate and a	any
The number of shares of	ARES f stock is: 1,0 TIAL OFFICERS	OOO AND/OR DIRECT	etors - P	resident	SECRETARY OF STATE DIVISION OF CORPORATIONS 15 APR 15 PM 1:07
Name and Tit Address	4208 M Sava507	deira Co	UIT Address: 1233	ile:	
Name and Title			Address:	le:	
Name and Title	e:			le:	

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of Name: Address: A208 Madeira Ct.	
Savagota, FL 3423 ARTICLE VII INCORPORATOR	SECRETARY DIVISION OF CO 15 APR 15
The <u>name and address</u> of the Incorporator is:	PH
Name: Maria-Stella EMU 4208 Madeira Cou Garagota, FL 34	
Having been named as registered agent to accept service of process this certificate, Lam familiar with and accept the appointment as registered Agent Require Signature/Registered Agent	for the above stated corporation at the place designated in istered agent and agree to act in this capacity 4/13/2015 Date
I submit this document and affirm that the facts stated herein are a document to the Department of State constitutes a third degree felong Required Stgnature/Incorporator	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S. A 13 2015 Date