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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : I20070000020
Phone : (813) 435-3176
Fax Number : (713) 429-1276

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: NS@NickSpradlin.com

**FLORIDA PROFIT/NON PROFIT CORPORATION
CHRISTINA ANNETTE HAGAR P A**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

RECEIVED

16 APR -7 PH 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TL
4/8/16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 APR -7 PH 12:52

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: CHRISTINA ANNETTE HAGAR P A

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4295 GLASGOW COURT
NORTH FORT MYERS FL 33903

4295 GLASGOW COURT
NORTH FORT MYERS FL 33903

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROFESSIONAL REAL STATE AGENT SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 1000 shares at 10 cents par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CHRISTINA ANNETTE HAGAR DPST

Name and Title: _____

Address 4295 GLASGOW COURT
NORTH FORT MYERS FL 33903

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE FLORIDA

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: The Law Offices of Nick Spradlin, PLLC
 Address: 2202 N. WEST SHORE BLVD. #200
TAMPA, FL 33607

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 16 APR -7 PM 12:52
 4411 6113

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NICKOLAS J. SPRADLIN ESQ.
 Address: 2202 N. WEST SHORE BLVD. #200
TAMPA, FL 33607

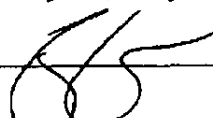
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

04/07/2016

 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

04/07/2016

 Date