

CFA

American Institute of
Certified Public Accountants

Florida Institute of
Certified Public Accountants

P95000059099

J.P. SPILLANE, Certified Public Accountant

12788 W. Forest Hill Blvd., Suite 2005
Wellington, FL 33414

Office (407) 790-1488
Fax (407) 790-6830

July 25, 1995

Secretary of State
Corporation Records Bureau
Department of State
P. O. Box 6327
Tallahassee, FL 32314

300001548573
-07/28/95--01035--010
*****70.00 *****70.00

To Whom It May Concern:

Please see enclosed original and copy of Articles of Incorporation for Michele M. Lawrence, P. A.

Also please see enclosed check in the amount of \$ 70.00 to cover the costs of incorporation fees of said corporation.

If there are any questions regarding this corporation, please call the number listed.

Thank You.

Sincerely,

J.P. Spillane
J. P. Spillane, C.P.A.

JPS:wsk

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. CHESSEY AUG 1 1995

ARTICLES OF INCORPORATION

WE, THE UNDERSIGNED, hereby associate ourselves together for the purpose of becoming a corporation under the laws of the State of Florida providing for the formation, liability, rights, privileges and immunities of corporations for profit.

ARTICLE I, NAME

The name of this corporation shall be:

Michele M. Lawrence, P. A.

ARTICLE II, NATURE OF BUSINESS

This corporation may engage in any activity or business permitted under the laws of the United States and the State of Florida, operating as a professional association performing real estate services.

ARTICLE III, CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is one hundred shares of common stock, of one dollar (\$1.00) par value.

ARTICLE IV, INITIAL CAPITAL

The amount of capital with which this corporation will begin business will not be less than one hundred dollars.

ARTICLE V, TERM OF EXISTENCE

The corporation is to have perpetual existence.

ARTICLE VI, ADDRESS

The initial street address in the State of the principal office of the corporation shall be: 12788 W. Forest Hill Blvd., Suite #2005
Wellington, FL 33414

The Board of Directors may from time to time move the principal office to any other address in Florida.

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TALLAHASSEE, FLORIDA

ARTICLE VII, INITIAL BOARD OF DIRECTORS

This corporation shall have (1) Director initially.

The number of directors may be either increased or diminished by the by-laws adopted by the shareholders but shall never be less than one. The name and address of the initial Director of this Corporation is:

Michele M. Lawrence
P. O. Box 772
Loxahatchee, FL 33470

ARTICLE VIII, INCORPORATOR

The names and addresses of the incorporators:

Michele M. Lawrence
P. O. Box 772
Loxahatchee, FL 33470

ARTICLE IX, BY-LAWS

The power to adopt, alter, amend or repeal by-laws shall be vested in the board of directors and shareholders.

ARTICLE X, AMENDMENT

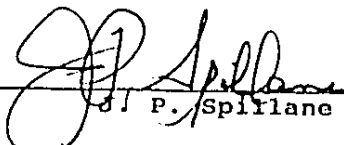
This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment to them, and any right conferred upon the shareholder is subject to this reservation.

ARTICLE XI, SUB CHAPTER S CORPORATION

This corporation may be a Sub-Chapter S Corporation as defined by the Internal Revenue Code.

ARTICLE XII, REGISTERED AGENT AND OFFICE

The Registered Agent, J. P. Spillane, accepts this position signed below:



J. P. Spillane

The registered office will be located at 12788 W. Forest Hill Blvd., Suite #2005, Wellington, FL 33414.



J. P. Spillane

In witness whereof, the undersigned, as subscribing incorporator, has herointo set my hand and seal this 25th day of July, 1995, for the purpose of forming this corporation under the Laws of the State of Florida, and hereby make and file, in the office of the Secretary of the State of Florida, these Articles of Incorporation, and certify that the facts herein stated are true.

Michele M. Lawrence
Michele M. Lawrence

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Sworn to and subscribed before me this 25 day of JULY, 1995, by MICHELE M. LAWRENCE, who is personally known to me or who produced a _____ as identification.

Richard J. Parkman, Sr.
Notary Public, State of Florida

RICHARD J. PARKMAN, SR.

My Commission expires:

