TRANSMITTAL LETTER 0016006

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

000002433710--7

			-02/18/980101: ****131.25 ***	8U **13
SUBJECT:	9W OFFICE OF D.C. (Proposed of	Corporate name - must include	e suffix)	
	und amo(1) comy of the artic	les of incorporation and s	check for	
□ \$70.00	and one(1) copy of the artic	\$122.50	\$131.25	
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	CHRIS LINDAR	n 0 0 0 Printed or typed)		
-	4412 SHUM+	920 OAK CT		므
		_0e104 32808 v, State & Zip	98 FEB 18	DIVISION OF CORPORATION
-				H COS
-	40ŋ- 2. Daytime	93-9/9/ Telephone number	PM 1:2	PORATI

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida

Business Corporation Act, hereby adopts the following Ar	ticles of Incorporation.
ARTICLE I NAME The name of the corporation shall be: Law Office	OF D.C. LINDAMODD, P.A.
ARTICLE IA) SPECIFIC PURPOSE: The	purpose of the professional corporation is to provide legal services.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of	f this corporation shall be:
4412 SHU ORLANDO,	MARD OAK CT. FLACIOA 32808
ARTICLE III SHARES The number of shares of stock that this corporation is	authorized to have outstanding at any one time is:
TEN	DIVISIO 981
	SENT AND STREET ADDRESS stered agent are:
The name and Florida street address of the initial region D.C. LINDAI	stered agent are.
4412 SHUMA ORLANDO IPCO	ARD BAKCT
ARTICLE V INCORPORATOR The name and address of the incorporator to these A	Articles of Incorporation are:
De Limbanon	2/13/98
Signature/Incorporator	Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Dollindamon	2/13/98	
Signature/Registered Agent	Date	