## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

	900025905093 -07/16/9801014-022 ****122.50 ****122.50
Signature	Art of Inc. File  LTD Partnership File  Foreign Corp. File  L.C. File  Fictitious Name File  Fictitious Name File  Trade/Service Mark  Merger File  Art. of Amend. File  RA Resignation  Dissolution / Withdrawal  Annual Report / Reinstatement  Cert. Copy  Photo Copy  Certificate of Good Standing  Certificate of Fictitious Name  Corp Record Search  Officer Search  Fictitious Owner Search
Signature	Vehicle Search  Driving Record
Name Date Time  Walk-In Will Pick Up	UCC 1 or 3 File



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 16, 1998

CAPITAL CONNECTION, INC. 417 E, VIRGINIA ST. STE. TO STALLAHASSEE, FL 32302

SUBJECT: SANDRA VELEZ-FELFLE, P.A. Ref. Number: W98000016165

We have received your document for SANDRA VELEZ-FELFLE, P.A. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6878.

John Nedeau Document Specialist

Letter Number: 198A00037836

corrected

#### ARTICLES OF INCORPORATION

OF

#### SANDRA VELEZ-FELFLE, P.A.

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#### ARTICLE I.

#### **CORPORATE NAME**

The name of the corporation is: SANDRA VELEZ-FELFLE, P.A.

#### ARTICLE II.

#### **NATURE OF CORPORATE BUSINESS**

The corporation may engage in or transact any or all activity or business permitted under the laws of the United States and the State of Florida. The specific nature of the business is the practice of law.

### ARTICLE III.

#### CAPITAL STOCK

The corporation is authorized to issue and have outstanding at any one time an aggregate number of 1,000 of one class of common stock having a par value of ONE (\$1.00) DOLLAR per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

#### ARTICLE IV.

#### PREEMPTIVE RIGHTS

Shareholders of corporation shall have preemptive rights.

#### ARTICLE V.

#### INITIAL REGISTERED AGENT

#### AND INITIAL REGISTERED OFFICE

The corporation's initial Registered Agent and Registered Office in the State of Florida is:

INITIAL REGISTERED AGENT:

SANDRA VELEZ-FELFLE

INITIAL REGISTERED OFFICE:

3059 Matilda Street, Coconut Grove, FL 33133

INITIAL PRINCIPAL OFFICE OF CORPORATION: P.O. Box 330605, Miami, FL

33233-0605

#### ACKNOWLEDGMENT AND CONSENT OF REGISTERED AGENT:

Having been named Initial Registered Agent to accept service of process on the corporation at the Initial Registered Office designated in these Articles of Incorporation, I hereby accept such status and consent to act in this capacity and agree to comply with all the requirements of law pertaining thereto.

SANDRA VELEZ-FELFLE. REGISTERED AGENT

#### ARTICLE VI.

#### **INITIAL BOARD OF DIRECTORS**

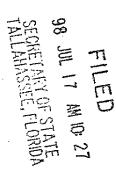
The number of directors constituting the initial Board of Directors of the Corporation is one (1) which number may be increased as provided by the By Laws.

### ARTICLE VII.

#### **INITIAL DIRECTORS**

The names and addresses of the initial Board of Directors are:

SANDRA VELEZ-FELFLE - P.O. Box 330605, Miami, FL 33233-0605



#### ARTICLE VIII.

#### **INCORPORATORS**

The names and addresses of the incorporators executing these Articles of Incorporation are:

SANDRA VELEZ-FELFLE - P.O. Box 330605, Miami, FL 33233-0605

SANDRA VELEZ-FELFLE

STATE OF FLORIDA)

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COUNTY OF DADE)

BEFORE ME, personally appeared SANDRA VELEZ-FELFLE to me well known and known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and she acknowledged before me that he executed the same for the purposes therein expressed, who is personally known to me or who did produce a Florida Driver's License as identification.

WITNESS my hand and official seal in the County and State named above this

NOTARY PUE

Printed Name:

My commission expires:

D GAIL ADAMS
My Commission CC425253
Expires Dec. 07, 1998
Bonded by ANB
800-852-5878