Form C. Transmittal Letter to Secretary of State



98 SEP 14 PM 3: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

	legal Professi roposed corporate r	onals, Inc. name – must include su	uffix)			
Enclosed is an origina for:	l and one (1) copy	of the articles of inco	prporation and a chec	k		
x \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	.a. 1		
Please return the photocopy to me with the filing date stamped on it.						
		60	00002638 <b>4</b> 2 -09/14/980108 ******70.00 ***	267 3022 ***70.00		
FROM:	Lori A.	Reid				
	Name (printed or typed)					
18610 15th Avenue						
		Address				
-		FL 32833 , State & Zip	<u>.</u>			
	<u>407=568-</u> <b>Daytime T</b>	2201 elephone Number	<u> </u>	comment of		

## **Articles of Incorporation**

1. The second of the second on shall be	FILED	
1. The name of the corporation shall be:	98 SEP 14 PI	13:14
Paralegal Professionals, Inc.		
<ol> <li>The principal place of business and mailing address of the coc/o Lynn Edwards 1434 Pon Pon Court Orlando, FL 32825</li> </ol>	rporatiônGBETARY OF TALLAHASSEE, F	STATE
3. The corporation shall have the authority to issue 1,000	shares of stoc	k
4. The registered agent of the corporation is <u>Dortha L.</u> registered street address is <u>11530 Lastchance Road</u> , C1	Reid and ermont	the 
Florida 34711		
5. The initial Board of Directors shall have 2 member(s) whose is/are as follows: Lynn Edwards - 1434 Pon Pon Cour 32825 and Lori Reid - 18610 15th Avenue, Orland	name(s) and address( t, Orlando FL o FL 32833	es) —
The number of directors may be raised or lowered by amount the corporation but shall in no case be less than one.  6. The incorporator of this corporation is Lori Reid		
address is 18610 15th Avenue, Orlando FL 32833		
Dated 8/21/98  Incorporator	a. Reed	·
Having been named as registered agent and to accept service of proper corporation at the place designated in this certificate, I hereby a registered agent and agree to act in this capacity. I further a provisions of all statutes relating to the proper and complete perform familiar with and accept the obligations of my position as re-	ccept the appointmen gree to comply with ormance of my duties, a	t as the
· Dated 8/21/98  Oostha  Registered Age	L. Reid	- 