

P99000088698

Date: 09/02/99

Secretary of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Barbara K. Dorn P.A.

500003004405--6
-10/04/99--01103--018
****122.50 *****78.75

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Barbara K. Dorn

Barbara K. Dorn P.A.
1048 Tournament Dr.
Spring Hill, FL 34608
(352) 596-9999

FILED
99 OCT -4 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED
99 OCT -4 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
Of
BARBARA K. DORN P.A.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is: BARBARA K. DORN P.A.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in real estate sales permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue one thousand shares (1,000) of one Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME: Barbara K. Dorn P.A.
ADDRESS: 1048 Tournament Dr.
CITY: Spring Hill, FLORIDA ZIP: 34608

The name and street address of the Initial Registered Agent of this Corporation is:

NAME: Barbara K. Dorn
ADDRESS: 1048 Tournament Dr.
CITY: Spring Hill, FLORIDA ZIP: 34608

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME: Barbara K. Dorn
ADDRESS: 1048 Tournament Dr.
CITY: Spring Hill, FLORIDA ZIP: 34608
NAME: _____
ADDRESS: _____
CITY: _____ FLORIDA ZIP: _____

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME: Barbara K. Dorn		
ADDRESS: 1048 Tournament Dr.		
CITY: Spring Hill,	FLORIDA	ZIP: 34608
NAME: _____		
ADDRESS: _____		
CITY: _____	FLORIDA	ZIP: _____

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 2nd day of September, 1999.

Barbara K. Dorn (Seal)

_____ (Seal)

_____ (Seal)

State of Florida)
County of _____) SS

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared:

Barbara K. Dorn D650-071-44-501-0
Signature Form of Identification

Signature Form of Identification

Signature Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that _____ executed these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath (was) (was not) taken.

Witness my hand and official seal in the County and State last aforesaid this day of19.....

Notary Signature

Printed Notary Signature

**CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT**

FILED
99 OCT -4 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF REGISTERED AGENT OF

BARBARA K. DORN P.A.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at **1048 Tournament Dr.** has named **Barbara K. Dorn** located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

X Barbara K. Dorn
(Registered agent)