P9900011953

TRANSMITTAL LETTER

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

Tallahassee, FL 32314	, · · ···	•		
SUBJECT:(Pro	JOHN MDN posed corporate n	TESANO P. A ame - must include suffix	60000307	796860 01073017 75 *****78.75
Enclosed is an original a for:	and one (1) co \$78.75 Filing Fee & Certificate	py of the articles of i \$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	check
FROM:	JOHN Name	MONTESAN (printed or typed)	20	
	4007	WOODALRE Address	LANE'-	er i sa s
	TAMPA	ty, State & Zip	24_	
	ΜVE) 404 - DDD \ Telephone number		
(2-13c)	TO <u>A purpose</u>			
DOC. EXAM Sti			S. Thompson	1 DEC 3 0 1999

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

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

JOHN MONTESAND P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

4007 WOODACRE LN. TAMPA FL 33624

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

IDDD SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOHN MONTESANO 4007 WOODACRE LN. TAMPA FL 33624

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JOHN MONTESAND 4007 WOUDACKE LN. TAMPA, FL 33624

ARTICLE VI PURPOSE

Preal Estate

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22 ND day of DECEMBER 1999.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: JOHN MONTESAN	10 P.A.
	99 DEC
2. The name and address of the registered agent and office is:	ASSE 23
JOHN MONTESAND	
(Name)	52 S
4007 WOODACRE LANE.	
(P.O. Box or Mail Drop Box NOT acceptable)	
TAMPA FL 33624	•
(City/State/Zip)	

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.

(Signature) 12 · 22 · 99