

PO9000003025

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/12/09--01003--015 **78.75

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09 JAN 12 AM 10:46
FILED
09 JAN 12 AM 11:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. McKnight JAN 13 2009

ECFS

**EXPRESS CORPORATE FILING SERVICE, INC
1000 PONCE DE LEON BLVD., STE: 101
CORAL GABLES, FL 33134
PH: (305)444-4994 FAX: (305)444-4977**

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. Agora Linguistic Services, Inc
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

- Walk in
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- Certified Copy
- Mail out
- Will wait
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- Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials _____

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AGORA LINGUISTIC SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

10575 SW 129 CT.
MIAMI, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

RENE UNDRERINER (P/D)
ADRIANA TORO DE UNDRERINER (V/D)
GUSTAVO TORO (S/D)
10575 SW 129 CT.
MIAMI, FL 33186

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

RENE UNDRERINER
10575 SW 129 CT.
MIAMI, FL 33186

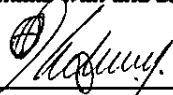
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RENE UNDRERINER, ADRIANA TORO DE UNDRERINER & GUSTAVO TORO
10575 SW 129 CT.
MIAMI, FL 33186

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TALLAHASSEE, FLORIDA


Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

01-08-09

Date



Signature/Incorporator

01-08-09

Date