

PO5000086123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

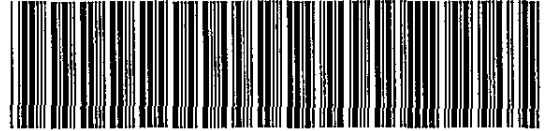
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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TRANSMITTAL LETTER

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

SUBJECT: Jon Polenberg, PA
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

| | |
|--|---|
| <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| ADDITIONAL COPY REQUIRED | |

FROM: Jon Polenberg
Name (Printed or typed)

4001 NW 93 Way
Address

Sunrise Florida, 33351
City, State & Zip

(954) 572-0710
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and Chapter 621 of the Florida Statutes

ARTICLE I

NAME

The name of the corporation shall be Jon Polenberg, PA.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business/ mailing address is 4001 NW 93 Way, Sunrise Florida, 33351.

ARTICLE III

PURPOSE

The purpose for which the corporation is organized is to provide legal services.

ARTICLE IV

SHARES

The number of shares of stock is one hundred (100).

ARTICLE V

INITIAL OFFICERS AND/OR DIRECTORS

Jon Polenberg
4001 NW 93 Way
Sunrise Florida, 33351

ARTICLE VI

REGISTERED AGENT

The registered agent's name and Florida street address is Jon Polenberg, 4001 NW 93 Way, Sunrise Florida, 33351

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TALLAHASSEE, FLORIDA

ARTICLE VII

INCORPORATOR

The Incorporator's name and address is Jon Polenber, 4001 NW 93 Way Sunrise Florida, 33351

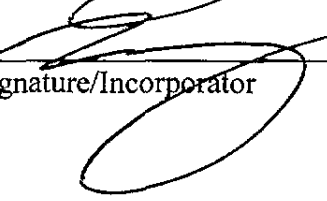
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

6/8/05

Date



Signature/Incorporator

6/8/05

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA