## P12000083196

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## **COVER LETTER**

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

SUBJECT: Paul T Cardillo P.A.		
(PROPOSED CORPORA	FE NAME – <u>MUST INCI</u>	<u>LUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
	ADDITIONAL CO	OPY REQUIRED
FROM: Paul T Cardillo Name	(Printed or typed)	
111 S. Armenia Ave. Sui	te 203	
Tampa FL 33609	State & Zip	
813-254-6370  Daytime Te	elephone number	
ptcardillo@tampabay.rr.c E-mail address: (to be used	OM for future annual report	notification)

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

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

	PRINCIPAL OFFICE Principal street address 111 S. Armenia Ave. Suite 203	Mailing address, if different is:		
	ampa FL 33609			
-		same		
ARTICLE III	PURPOSE			
The purpose for w Law Office	hich the corporation is organized is:			
<b>ARTICLE IV</b> The number of shar	SHARES res of stock is:100		,	
	INITIAL OFFICERS AND/OR DIRECT			
Name and Ti Address:	itle: Paul T Cardillo President 111 S. Armenia Ave. Suite 203	Name and Title:		
Address:	Tampa FL 33609			
Name and Ti	itle:	Name and Title		
Address:				
Name and Ti	itle:	Name and Title		
Address:		Address:		
			AS:	~2
ARTICLE VI	REGISTERED AGENT		¥8	$\mathbb{S}$
	rida street address (P.O. Box NOT acceptable	) of the registered agent is:		2 0CT -
Name:	Paul T Cardillo	<u> </u>	35	
Address:	111 S. Armenia Ave. Suite 203 Tampa FL 33609	<del></del>	· '''	AM 10: 1
	·		<u> </u>	5
	INCORPORATOR		BA BA	
Name:	Iress of the Incorporator is: Paul T Cardillo		≥'''	$\sim$
Address:	111 S. Armenia Ave. Suite 203	<u> </u>		
	Tampa FL 33609	<del></del>		
laving been name his certificate, I an	ed as registered agent to accept service of pro in familiar with and accept the appointment as t	cess for the above stated corpregistered agent and agree to	poration at the place design act in this capacity 9/28/12	ated in
	Required Signature/Registered Agent		9/20/12 Date	
	ment and affirm that the facts stated herein a spartment of State constitutes of third degree fel	are true. I am aware that the	e false information submitte	ed in a
			9/28/12	
	<del></del>		9/28/12	