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(Requestor's Name)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

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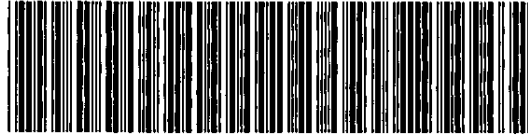
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OCT 20 2015

T. SCOTT



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15 OCT 2015 9:20 AM



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 24, 2015

JOHN PAPPAS
4203 W GRANADA ST
TAMPA, FL 33629

SUBJECT: JOHN PAPPAS, P.A.
Ref. Number: W15000063507

RECEIVED
15 OCT -5 AM 10:02
DIVISION OF CORPORATIONS
STATE DEPARTMENT OF STATE
TAMPA, FLORIDA 33604

We have received your document for JOHN PAPPAS, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 315A00020149

COVER LETTER

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

SUBJECT: JOHN PAPPAS, P.A.
(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

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: JOHN PAPPAS
Name (Printed or typed)

4203 W. GRANADA ST.
Address

TAMPA, FL 33629
City, State & Zip

(813) 924-6197
Daytime Telephone number

johnpappas111@yahoo.com
E-mail address: (to be used 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)

ARTICLE I NAME

The name of the corporation shall be: JOHN PAPPAS, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4203 W. GRANADA ST.
TAMPA, FL 33629

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY & ALL LAWFUL BUSINESS.
* RESIDENTIAL REAL ESTATE SALES AS AN AGENT IN
FLORIDA
& THE SELLING OF FINANCIAL PRODUCTS TO CLIENTS.

ARTICLE IV SHARES

The number of shares of stock is: 1500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>JOHN PAPPAS</u>	Name and Title:	_____
Address	<u>4203 W. GRANADA ST</u> <u>TAMPA, FL 33629</u>	Address:	_____ _____ _____
Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____
Name and Title:	_____	Name and Title:	_____
Address	_____ _____ _____	Address:	_____ _____ _____

15 OCT - 8 AM 9:20

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: CORPORATION SERVICE Company
Address: 1201 HAYS ST.
TALLAHASSEE, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: JOHN PAPPAS
Address: 4203 W. GRANADA ST.
TAMPA, FL 33629

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: AUGUST 25, 2015. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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


Required Signature/Registered Agent

10/03/15
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

09/09/2015
Date