P98000043139

TRANSMITTAL LETTER

Department Division of P.O. Box 63 Tallahassee	of State Corporations 327 c, Florida 3231		- 44 <u>-</u>	200	0025065 -04/30/980 ****122.50	424 1054013 ****122.50
SUBJECT: Ra	ymond Copell, F	2.A.				
I encl Articles of in the amou	ose an original Incorporation unt of \$ 122.50	l and for the	1 above c	copy(ie orporation	es) of the and a check	e
Signature:	Raymus	Copel	7 .			
From:	Raymond Copell Name		·			

Florida

Lauderdale Lakes

(954) 730-8881 Telephone Number

City

98 MAY 13 PM 12: 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TA-5/13/98 W98-9915



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 4, 1998

RAYMOND COPELL 2860 SOMERSET DR LAUDERDALE LAKES, FL 33311

SUBJECT: RAYMOND COPELL, P.A.

Ref. Number: W98000009915

We have received your document for RAYMOND COPELL, P.A. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the 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) 487-6926.

Tracy Augsburger Document Specialist

Letter Number: 098A00024281

5/11/98 Collection attached.
Collection attached.
Thanks for your help
on the Pars

May 11, 1998

Tracy Augsburger C/O Division of Corporations P.O. Box 6327 Tallahassee FL 32314

Dear Tracy,

Enclosed please find the corrected documents for the formation of: RAYMOND COPELL, P.A.

My daytime phone number and address is:

954-772-1122

Raymond Copell C/O Transworld Business Brokers, Inc. 2803 East Commercial Blvd. Suite 200 Ft. Lauderdale FL 33308

Thank you for all your assistance in this matter.

Yours truly,

Raymond Copell

Raymon Cople

ARTICLES OF INCORPORATION OF

Raymond Copell, P.A.

ARTICLE I NAME

The name of the corporation shall be:

Raymond Copell, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of
this corporation shall be:
2860 Somerset Drive K-311
Lauderdale Lakes, FL 33311
ARTICLE III CAPITAL STOCK
The number of shares of stock that this corporation is
authorized to have outstanding at any one time is:
One Hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Raymond Copell

2860 Somerset Drive K-311

Lauderdale Lakes, FL 33311

ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

The purpose of this professional association is to perform all activities of real estate sales as licensed by the State of Florida.

2860 Somerset Drive K-311

Lauderdale Lakes, FL 33311

Raymond Copell

The undersigned has executed these Articles of Incorporation this $\frac{27}{7}$ day of $\frac{Apr.}{199}$.

Raymond Copell, Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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:

Raymond Copell, P.A.

2. The name and address of the registered agent and office is:

Raymond Copell	₹	· -မာ	
2860 Somerset Drive K-311	LEGR.	8 H.	
Lauderdale Lakes, FL 33311	TAR	<u></u>	
	CE, F	PHI	T
Signature: Raymon Copall	STATE	12: 05	
Title: Incorporator	. ÷		
Date: 4/27/98			

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:

Date: 4/2)/98