

P/4000053045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

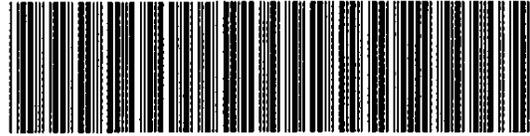
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700261031047

06/16/14--01027--017 \*\*87.50

FILED  
14 JUN 16 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*R* 06/18/14



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

**ARTICLE I NAME** Rinaldi Law, P.A.  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**  
Principal ~~street~~ address Mailing address, if different is:  
1167 Executive Cove Drive  
Fruit Cove, Florida 32259-2801

**ARTICLE III PURPOSE** to provide legal services and to practice law.  
The purpose for which the corporation is organized is: \_\_\_\_\_

**ARTICLE IV SHARES** 100  
The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	Donato J. Rinaldi, President	Name and Title:	_____
Address	1167 Executive Cove Drive	Address:	_____
	Fruit Cove, Florida 32259-2801		_____

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

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

FILED  
14 JUN 16 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Donato J. Rinaldi, Esq.  
Address: 1167 Executive Cove Drive  
Fruit Cove, Florida 32259-2801

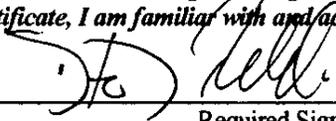
FILED  
14 JUN 16 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Donato J. Rinaldi  
Address: 1167 Executive Cove Drive  
Fruit Cove, Florida 32259-2801

*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*

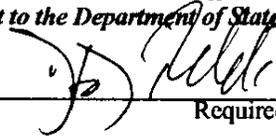


Required Signature/Registered Agent

12 JUN 14

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

12 JUN 14

Date