

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

Account Name : CORP USA  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
JAMES W. SPENCER, CPA, PA**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

12/18/15 12/17/2015

15 DEC 17 AM 9:39

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15 DEC 17 PM 3:38

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HIS 000 248 257

COVER LETTER

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

SUBJECT: James W. Spencer, CPA, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: James W. Spencer

Name (Printed or typed)

200 S. Biscayne Blvd., 6 Floor

Address

Miami FL 33131

City, State & Zip

305-960-8880

Daytime Telephone number

jspencer@bpbcpa.com

E-mail address: (to be used for future annual report notification)

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

FILED  
15 DEC 17 AM 9:39  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

FILED

**ARTICLE I NAME**

The name of the corporation shall be: James W. Spencer, CPA, PA

15 DEC 17 AM 9:39

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

Mailing address, if different, is:

200 S. Biscayne Blvd.

Sixth Floor

Miami FL 33131

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: accounting and tax services

**ARTICLE IV SHARES 500**

The number of shares of stock is: 500

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

Name and Title: James W. Spencer, President

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

(cont.)

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: James W. Spencer  
Address: 200 S. Biscayne Blvd., 6 Floor  
Miami FL 33131

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: James W. Spencer  
Address: 200 S. Biscayne Blvd., 6 Floor  
Miami FL 33131

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

James W. Spencer  
Required Signature/Registered Agent

12/16/2015  
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.

James W. Spencer  
Required Signature/Incorporator

12/16/2015  
Date

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TALLAHASSEE, FLORIDA

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