

NO9000009771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

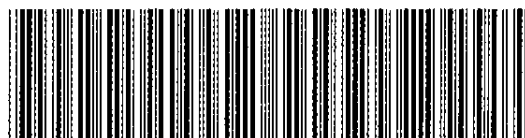
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/08/09--01002--018 **78.75

RECEIVED

09 OCT - 7 PM 4:42

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

09 OCT - 7 PM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
10/7

COVER LETTER

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

SUBJECT: Claimants' Attorneys' Email Listserv, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Lawrence A. Gonzalrz
Name (Printed or typed)

223 S. Gadsden St., 2nd Floor
Address

Tallahassee, FL 32301
City, State & Zip

850-222-0465
Daytime Telephone number

lawgonz@earthlink.net
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 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:
Claimants' Attorneys' Email Listserv, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:
223 South Gadsden Street, 2nd Floor P. O. Box 1734
Tallahassee, FL 32301 Tallahassee, FL 32302-1734

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To provide members of the organization with an electronic means of discussing issues and sharing information relating to the practice of law as a claimants' attorney in the workers' compensation system in Florida.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
The business of the corporation shall be conducted by a Board of Directors which shall consist of not less than three (3) persons, as shall be designated by the Bylaws, and elected at the annual meeting. The initial directors shall hold office until their successors are duly elected.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Michael J. Celeste, Chair 580 Village Blvd., Ste. 225 West Palm Beach, FL 33409-1953	Kellye A. Shoemaker P.O. Box 151057 Altamonte Springs, FL 33715-1057	Sandra T. McAuley 6245 Sweet Maple Ln Boca Raton, FL 33433-1932	Michael T. Reese 12800 University Drive, St. 600 Ft. Myers, FL 33907
Paul M. Doolittle 4811 Atlantic Blvd., Ste. 3 Jacksonville, FL 32207-2246	Erik B. Grindal 18503 Pines Blvd Ste 315 Pembroke Pines, FL 33029-1410	Paolo Longo 135 W. Central Blvd., Ste 1100 Orlando, FL 32801	

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

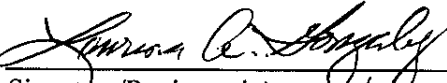
Lawrence A. Gonzalez
223 S. Gadsden St., 2nd Floor
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lawrence A. Gonzalez
223 S. Gadsden St., 2nd Floor
Tallahassee, FL 32301

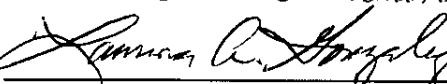
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent *Lawrence A. Gonzalez*

10/7/2009

Date



Signature/Incorporator

10/7/2009

Date

FILED

09 OCT -7 PM 5:00

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**