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D. WHITE NOV 19 2002

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

**SUBJECT:     LEGAL CLINIC, P.A.**

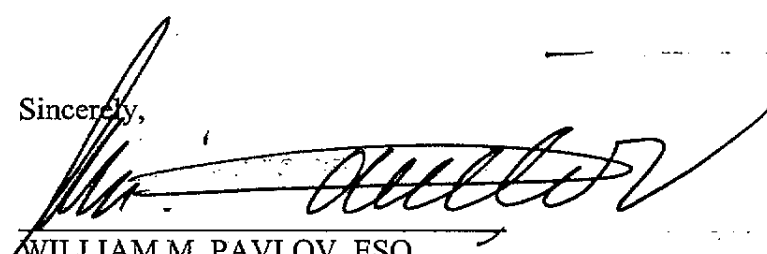
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Dear Sir/Madam:

Enclosed are an original and one (1) copy of the articles of incorporation and a check for \$78.75 for filing fee and a Certificate of Status.

FROM:               WILLIAM M. PAVLOV, ESQ.  
                      1250 E. HALLANDALE BEACH BLVD.  
                      SUITE 806  
                      HALLANDALE, FLORIDA 33009  
                      Daytime Telephone Number: (954) 455-9992  
                      Fax Number: (954) 455-9878

Sincerely,



WILLIAM M. PAVLOV, ESQ.

WMP/lw  
Enclosures

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 14 AM 9:55

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Pro)

### ARTICLE I NAME

The name of the corporation shall be: *LEGAL CLINIC, P.A.*

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: *1250 E. Hallandale Beach Blvd.  
Suite 806  
Hallandale, Florida 33009*

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *legal  
To provide professional services at a reasonable cost.*

### ARTICLE IV SHARES

The number of shares of stock is: *One Hundred (100)*

### ARTICLE V INITIAL OFFICERS/ DIRECTORS (optional)

The name(s), address(es) and title(s): *William M. Pavlov, President*

### ARTICLE VI REGISTERED AGENT

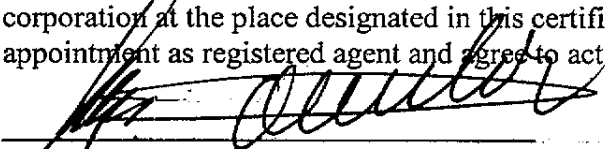
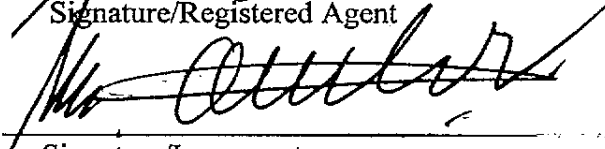
The name and Florida street address of the registered agent is: *William M. Pavlov, Esq.  
1250 E. Hallandale Beach Blvd.  
Suite 806  
Hallandale, Florida 33009*

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: *William M. Pavlov, Esq.  
1250 E. Hallandale Beach Blvd.  
Suite 806  
Hallandale, Florida 33009*

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above signed 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.

|                                                                                     |                 |
|-------------------------------------------------------------------------------------|-----------------|
|  | <i>11-11-02</i> |
| Signature/Registered Agent                                                          | Date            |
|  | <i>11-11-02</i> |
| Signature/Incorporator                                                              | Date            |