

P03000057474

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
03 MAY 16 AM 10:43

F. CHESLER MAY 22

## TRANSMITTAL LETTER

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

SUBJECT: TROY LUCHE ROBINSON, P.A.  
(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: TROY ROBINSON  
Name (Printed or typed)

14422 TANGLEWOOD DRIVE, N.  
Address

LARGO, FLORIDA 33774  
City, State & Zip

727-595-4918  
Daytime Telephone number

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

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

TROY LUCILE ROBINSON, P.A.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14422 TANGLEWOOD DRIVE, NORTH  
LARGO, FLORIDA 33774

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE SALES

### ARTICLE IV SHARES

The number of shares of stock is:

1000

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

The name(s), address(es) and title(s):

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

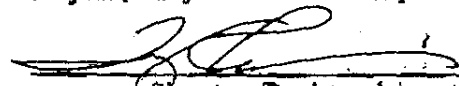
TROY LUCILE ROBINSON  
14422 TANGLEWOOD DRIVE, NORTH  
LARGO, FLORIDA 33774

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

TROY LUCILE ROBINSON  
14422 TANGLEWOOD DRIVE, NORTH  
LARGO, FLORIDA 33774

\*\*\*\*\*  
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

5/13/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5/13/03  
\_\_\_\_\_  
Date

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