

P03000148561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

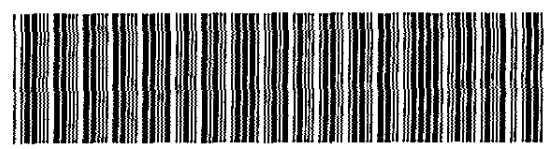
(Business Entity Name)

(Document Number)

Certified Copies 1      Certificates of Status \_\_\_\_\_

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11/17/03--01088--017    \*\*78.75

FILED  
03 DEC -8 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W03-35987  
28  
12/8

**TRANSMITTAL LETTER**

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

**SUBJECT: CRAIG STULTZ P. A.**  
(proposed corporate name must include suffix)

**Enclosed is an original and (1) copy of the articles of incorporation and a check for:**

<input type="checkbox"/>	<b>\$70.00</b>	<input type="checkbox"/>	<b>\$78.75</b>	<input checked="" type="checkbox"/>	<b>\$78.75</b>	<input type="checkbox"/>	<b>\$87.50</b>
	<b>Filing Fee</b>		<b>Filing Fee</b>		<b>Filing Fee</b>		<b>Filing Fee,</b>
			<b>&amp; Certificate</b>		<b>&amp; Certified</b>		<b>Certified Copy &amp;</b>
					<b>Copy</b>		<b>Certificate</b>
<b>ADDITIONAL COPY REQUIRED</b>							

**J. DAVID CAMPBELL**

Name printed or typed

**2805 TAMIANI TRAIL**

Street Address

**PUNTA GORDA, FL 33950**

City, State, and Zip Code

**941-639-0680**

Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

December 2, 2003

J. DAVID CAMPBELL  
2805 TAMIAMI TRAIL  
PUNTA GORDA, FL 33950

SUBJECT: CRAIG STULTZ P.A.  
Ref. Number: W03000035982

We have received your document for CRAIG STULTZ P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

You must list at least one incorporator with a complete business street address.

An effective date may be added to the Articles of Incorporation if a 2004 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6924.

Stacy Prather  
Document Specialist Supervisor  
New Filings Section

Letter Number: 903A00064700

**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:

**CRAIG STULTZ P. A.**

Real Estate Sales Consultant

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

**369 PORTOFINO DR.  
PUNTA GORDA, FL 33950**

**ARTICLE III SHARES**

The number of shares of stock is:

**100 SHARES**

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

**J. DAVID CAMPBELL  
2805 TAMiami TRAIL  
PUNTA GORDA, FL 33950**

**ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

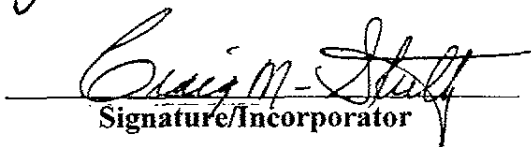
**CRAIG STULTZ  
369 Portofino Dr., Punta Gorda, FL 33950**

\*\*\*\*\*

*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

11/12/03  
Date

  
Signature/Incorporator

11/12/03  
Date

**FILED**  
03 DEC -8 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA