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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Jonathan Lowell, P. A. (proposed corporate name)

Enclosed please find an original copy of the Articles of Incorporation for the above corporation and a check in the amount of \$70.00.

FROM: Jonathan Lowell
Name

11555 Heron Bay Boulevard, Suite 101
Address

Coral Springs, Florida 33076
City, State & Zip

Note: Additional copy of articles is needed when certified copy is requested.

(954) 822-1004 Telephone Number

FILED ARTICLES OF INCORPORATION

<u>of</u>

03 DEC 18 AM 11: 09

JONATHAN LOWELL, P. A. SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under Section 621, Florida Statutes, also referred to as the "Professional Service Corporation and Limited Liability Company Act", hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

Jonathan Lowell, P. A.

ARTICLE II

The principal place of business and mailing address of this corporation shall be:

Jonathan Lowell, P. A. 11555 Heron Bay Boulevard, Suite 101 Coral Springs, Florida 33076

ARTICLE III SPECIFIC PURPOSE

The sole and specific purpose of this corporation shall be to render professional services with a business purpose in the sale of real property.

ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 500 shares.

ARTICLE V INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

Jonathan Lowell 11555 Heron Bay Boulevard, Suite 101 Coral Springs, Florida 33076

ARTICLE V INCORPORATOR

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

1. Jonathan Lowell 2173 N. W. 62nd Avenue Margate, Florida 33063

The undersigned has executed these Articles of Incorporation this 1st day of November, 2003.

President/Sec.

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

L.	The name of the corporation is:		
	Jonathan Lowell, P. A.		
2.	The name and address of the registered agent and		
	office is:		
	Jonathan Lowell		
	(Name)		
	11555 Heron Bay Boulevard. Suite 101		
	(P. O. Box <u>not</u> acceptable)		
	Coral Springs, Florida 33076 (City/State/Zip)		
	(CICY/Scace/Zip)		

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

DATE November I