

P04000042843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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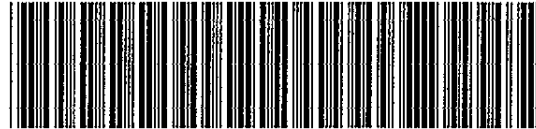
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

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

**SUBJECT:** LAW OFFICE OF MICHAEL MATES, 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:** Michael Mates

Name (Printed or typed)

1551 NW 125th Avenue #206

Address

Sunrise, FL 33323

City, State & Zip

954-846-1143

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:

Law Office of Michael Mates, P.A.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1551 NW 125th Ave  
#206  
Sunrise, FL 33323

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide professional attorney and related legal services.

### **ARTICLE IV SHARES**

The number of shares of stock is:

One Hundred (100)

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Michael Mates - Director, President, Secretary and Treasurer

### **ARTICLE VI REGISTERED AGENT**

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

Michael Mates  
1551 NW 125th Avenue  
#206  
Sunrise, FL 33323

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Michael Mates  
1551 NW 125th Avenue  
#206  
Sunrise, FL 33323

\*\*\*\*\*  
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

02-01-04

Date



Signature/Incorporator

02-01-04

Date

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