

P04000086948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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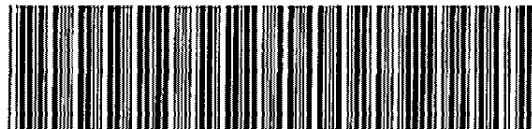
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT
CLERK OF SUPERIOR COURT

✓

W04-20582
AKS/1

TRANSMITTAL LETTER

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

SUBJECT: JOAN THOMSON 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: Joan Thomson

Name (Printed or typed)

9208 Tarleton Circle

Address

Weeki Wachee, FL 34613

City, State & Zip

352 279-3014

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 26, 2004

JOAN THOMSON
9208 TARLETON CIRCLE
WEEKI WACHEE, FL 34613

SUBJECT: JOAN THOMSON P.A.
Ref. Number: W04000020523

We have received your document for JOAN THOMSON P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

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) 245-6878.

Alan Crum
Document Specialist
New Filings Section

Letter Number: 004A00036890

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:

JOAN THOMSON P. A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9208 TARLETON CIRCLE
WEEKI WACHEE, FL 34613

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE ASSOCIATE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT
JOAN THOMSON
9208 TARLETON CIRCLE
WEEKI WACHEE, FL 34613

ARTICLE VI REGISTERED AGENT

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

GARY THOMSON
9208 TARLETON CIRCLE
WEEKI WACHEE, FL 34613

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOAN THOMSON
9208 TARLETON CIRCLE
WEEKI WACHEE, FL 34613

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

MAY 28, 2004

Date



Signature/Incorporator

MAY 28, 2004

Date

FILED
04 JUN -3 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA