

P04000119942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

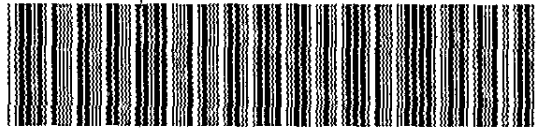
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W04-30661
08/11

TRANSMITTAL LETTER

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

SUBJECT: THOMAS FORCELLA, 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: THOMAS FORCELLA

Name (Printed or typed)

1814 E. OAKLAND PARK BLVD. #54

Address

FORT LAUDERDALE, FL 33306

City, State & Zip

954-661-3907

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 11, 2004

THOMAS FORCELLA
1814 E. OAKLAND PARK BLVD., #54
FT. LAUDERDALE, FL 33306

SUBJECT: THOMAS FORCELLA, P.A.
Ref. Number: W04000030661

We have received your document for THOMAS FORCELLA, P.A. and your check(s) totaling \$70.00. 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: 304A00049742

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:

THOMAS FORCELLA, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1814 E. OAKLAND PARK BLVD. #54
FORT LAUDERDALE, FLORIDA 33306

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:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

THOMAS FORCELLA
1814 E. OAKLAND PARK BLVD. #54
FORT LAUDERDALE, FLORIDA 33306

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

THOMAS FORCELLA
1814 E. OAKLAND PARK BLVD. #54
FORT LAUDERDALE, FLORIDA 33306

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



Signature/Incorporator

8/14/04.
Date

8/14/04
Date

FILED
04 AUG 18 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA