

PO4000127461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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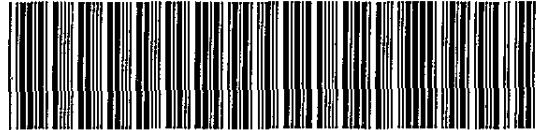
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: David C. Hicks, 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: Allison Hicks, Esq.

Name (Printed or typed)

3550 Buschwood Park Drive, Suite 320

Address

Tampa, FL 33618-4450

City, State & Zip

813-933-6767 Ext. 108

Daytime Telephone number

04 SEP -8 PM 2:46
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

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:

David C. Hicks, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2700 Azeele St.
Tampa, FL 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For professionals duly licensed or otherwise legally authorized to render professional services.

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):

David C. Hicks, Esq.
President
2700 Azeele St.
Tampa, FL 33609

ARTICLE VI REGISTERED AGENT

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

Allison Hicks, Esq.
3550 Buschwood Park Drive, Suite 320
Tampa, FL 33618-4450

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David C. Hicks, Esq.
2700 Azeele St.
Tampa, FL 33609

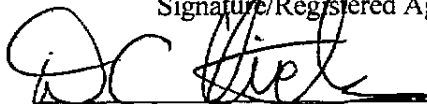
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

Sept. 1, 2004

Date



Signature/Incorporator

Sept. 1, 2004

Date

04 SEP -8 PM 2:45
DIVISION OF CORPORATE
STATE OF FLORIDA