

P04000128886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

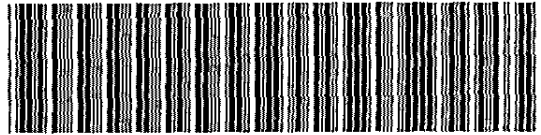
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500040741475

09/10/04--01016--011 **87.50

04 SEP 10 AM 11:00
FILED
U.S. DEPT. OF JUSTICE

9/13/04

TRANSMITTAL LETTER

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

SUBJECT: Law Office of Michael C. McGinn, 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 C. McGinn

Name (Printed or typed)

2530 Arborwood Drive

Address

Valrico, FL 33594

City, State & Zip

813-810-4501

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 C. MCGINN, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

505 E. JACKSON ST., SUITE 207
TAMPA, FL 33602

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE PURPOSE OF THIS CORPORATION SHALL BE THE PRACTICE OF LAW, AND TO TRANSACT ANY AND ALL LAWFUL ACTIVITIES OR BUSINESS UNDER THE LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTRY, TERRITORY, OR NATION.

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):

MICHAEL C. MCGINN
505 E. JACKSON ST., SUITE 207
TAMPA, FL 33602

Title: PRESIDENT

ARTICLE VI REGISTERED AGENT

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

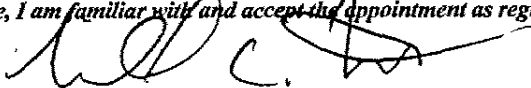
MICHAEL C. MCGINN
505 E. JACKSON ST., SUITE 207
TAMPA, FL 33602

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL C. MCGINN
505 E. JACKSON ST., SUITE 207
TAMPA, FL 33602

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

FILED

04 SEP 10 AM 11:01

CLERK OF COURT
TALLAHASSEE, FLORIDA

09/08/04

Date

09/08/04

Date