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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

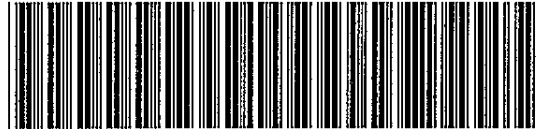
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-24-04

## TRANSMITTAL LETTER

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

SUBJECT: The Law Offices of Debra L. Munchel, P.C.  
(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: Debra L. Munchel  
Name (Printed or typed)

3203 S. Colony Rd. Ste. 100  
Address

Ocala, FL 32812  
City, State & Zip

407-334-3329  
Daytime Telephone number

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **ARTICLES OF INCORPORATION**

### **ARTICLE I: NAME**

The name of the corporation shall be:

The Law Offices of Debra L. Munchel, P.A.

### **ARTICLE II: PRINCIPAL OFFICE**

The principal place of business/mailing address is:

3203 S. Conway Rd. Ste. 106  
Orlando, FL 32812

### **ARTICLE III: PURPOSE**

The purpose for which the corporation is organized is the practice of law.

### **ARTICLE IV: SHARES**

The number of shares of stock is ten (10).

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

List the name, address, and specific title:

President and Chief Executive Officer  
Debra L. Munchel  
3203 S. Conway Rd. Ste. 106  
Orlando, FL 32812

### **ARTICLE VI: REGISTERED AGENT**

The name and street address of the registered agent is:

Debra L. Munchel  
3203 S. Conway Rd. Ste. 106  
Orlando, FL 32812

**ARTICLE VII: INCORPORATOR**

The name and address of the incorporator is:

Debra L. Munchel  
3203 S. Conway Rd. Ste. 106  
Orlando, FL 32812

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*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*

Debra Munchel  
Signature of Registered Agent

9/22/04  
Date

Debra Munchel  
Signature of Incorporator

9/22/04  
Date