

PO5000035200

(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



100046477061

02/17/05--01035--001 **70.00

FILED

05 FEB 17 AM 8 08

cd.3-4

TRANSMITTAL LETTER

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

SUBJECT: J. Radice, 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: Jennifer Radice
Name (Printed or typed)

360 Seneca Lane
Address

Boca Raton, FL 33487
City, State & Zip

561-789-5712
Daytime Telephone number

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



RECEIVED

FLORIDA DEPARTMENT OF STATE 05 MAR -7 PM 3:11
Glenda E. Hood
Secretary of State

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

February 25, 2005

JENNIFER RADICE
360 SENECA LANE
BOCA RATON, FL 33487

SUBJECT: J. RADICE, P.A.
Ref. Number: W05000010009

We have received your document for J. RADICE, 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 specific nature of business of the professional association must be stated in the document.

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) 245-6052.

Carolyn Lewis
Regulatory Specialist II
New Filings Section

Letter Number: 205A00013463

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:

J. Radice, P. A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

360 Seneca Lane
Boca Raton, FL 33487

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any lawful purpose
* real estate

ARTICLE IV SHARES

The number of shares of stock is:

500 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jennifer Radice
360 Seneca Lane
Boca Raton, FL 33487 President

ARTICLE VI REGISTERED AGENT

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

Jennifer Radice
360 Seneca Lane
Boca Raton, FL 33487

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jennifer Radice
360 Seneca Lane
Boca Raton, FL 33487

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

Jennifer Radice
Signature/Registered Agent

2/15/05
Date

Jennifer Radice
Signature/Incorporator

2/15/05
Date

FILED
05 FEB 17 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA