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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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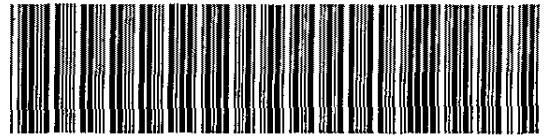
(Business Entity Name)

(Document Number)

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2005 MAR 24 PM 3:16  
TALLAHASSEE FLORIDA

3/30/05

## TRANSMITTAL LETTER

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

2005 MAR 24 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**SUBJECT:** Powell & Associates of Tampa Bay Inc.

(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Mandy R. Powell

Name (Printed or typed)

905 Hickory Fork Dr

Address

Seffner, FL 33584

City, State & Zip

407-361-5311

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:

Powell & Associates of Tampa Bay, Inc.

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CLERK OF STATE  
TALLAHASSEE FLORIDA

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

905 Hickory Fork Dr. Seffner, Fl 33584

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Financial Consulting/Property Management

### **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):

Mandy R. Powell - President  
905 Hickory Fork Dr. Seffner, Fl 33584

Brian E. Powell - Vice President  
905 Hickory Fork Dr. Seffner, Fl 33584

### **ARTICLE VI REGISTERED AGENT**

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

Mandy R. Powell  
905 Hickory Fork Dr.  
Seffner, Fl 33584

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Mandy R. Powell  
905 Hickory Fork Dr.  
Seffner, Fl 33584

\*\*\*\*\*

*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*

*Mandy R. Powell*

Signature/Registered Agent

*3/21/05*

Date

*Mandy R. Powell*

Signature/Incorporator

*3/21/05*

Date