

PD5000051112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

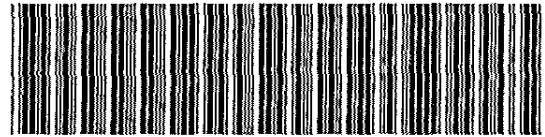
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 APR -1 PM 1:06

FILED

4/6/05
BWL

TRANSMITTAL LETTER

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

SUBJECT: JUANITA POWELL, 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: JUANITA POWELL, ESQUIRE
Name (Printed or typed)

255 N. LIBERTY STREET, SUITE A
Address

JACKSONVILLE, FL 32202
City, State & Zip

904-354-0104
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)

FILED

05 APR -1 PM 1:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

JUANITA POWELL, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

255 N. LIBERTY STRETT, SUITE A
JACKSONVILLE, FL 32202

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PRACTICE OF LAW

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):
JUANITA POWELL, ESQUIRE - PRESIDENT

ARTICLE VI REGISTERED AGENT

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

JUANITA POWELL, ATTORNEY AT LAW
255 N. LIBERTY STREET, SUITE A
JACKSONVILLE, FL 32202

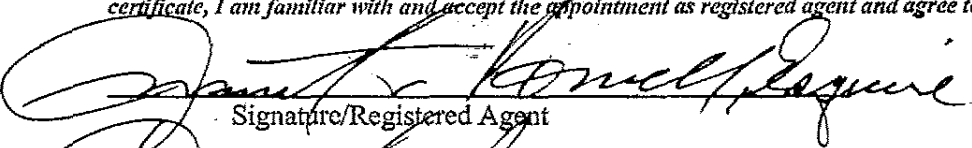
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

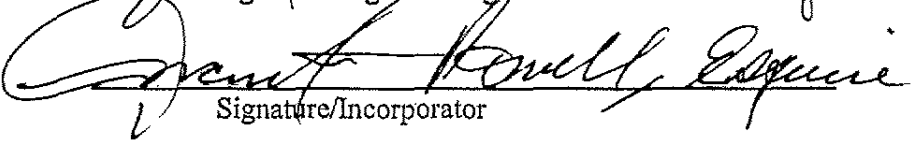
255 N. LIBERTY STREET, SUITE A
JACKSONVILLE, FL 32202

JUANITA POWELL, ATTORNEY AT LAW

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


Date


Signature/Incorporator


Date