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(Address)

(Address)

(City/State/Zip/Phone #)

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05 APR 25 PM 4:16  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

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

**SUBJECT:     GEORGE G. KAUPER, P.A.**

\_\_\_\_\_  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

**XX \$78.75**  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee &  
Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

**FROM:**

**George G. Kauper**

\_\_\_\_\_  
(Name: printed or typed)

**6781 SW 39<sup>th</sup> Court**

\_\_\_\_\_  
(Address)

**Davie, FL 33314**

\_\_\_\_\_  
(City, State, Zip)

**954-673-9011**

\_\_\_\_\_  
(Daytime Telephone Number)

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

FILED

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

05 APR 25 PM 4: 16

**ARTICLE I NAME**

*The name of the corporation shall be:*

George G. Kauper, P.A.

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

*The principal place of business/mailling address is:*

6781 SW 39<sup>th</sup> Court  
Davie, FL 33314

**ARTICLE III PURPOSE**

*The purpose for which the corporation is organized is:*

Sell Real Estate

**ARTICLE IV SHARES**

*The number of share of stock is:*

500 shares

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

*The name(s) and address(es):*

George G. Kauper, pres.  
6781 SW Court  
Davie, FL 33314

**ARTICLE VI REGISTERED AGENT**

*The names(s) and address(es):*

George G. Kauper  
6781 SW 39<sup>th</sup> Court  
Davie, FL 33314

**ARTICLE VII INCORPORATOR**

*The name and address of the Incorporator is:*

George G. Kauper  
6781 SW 39<sup>th</sup> Court  
Davie, FL 33314

.....  
*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