

P05000068458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

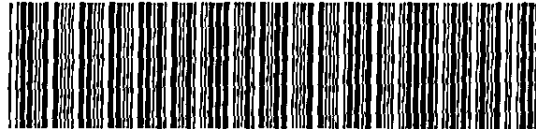
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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600051353676

04/27/05--01015--007 **78.75

EXPIRATION DATE

06-1-05

05 MAY 10 AM 7:30

SECRETARY
DIVISION

WOS-22/66

TRANSMITTAL LETTER

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

SUBJECT: Schwinn Law Firm, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Christina Harris Schwinn
Name (Printed or typed)

PO Box 150256
Address

Cape Coral, FL 33915-0256
City, State & Zip

(239) 541-2822
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 2, 2005

CHRISTINA HARRIS SCHWINN
P O BOX 150256
CAPE CORAL, FL 33915-0256

SUBJECT: SCHWINN LAW FIRM, P.A.
Ref. Number: W05000022166

We have received your document for SCHWINN LAW FIRM, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Shareholder is not recognized as an officer or director on our data base. You may use such letters as P,V,S,T or D for Director.,

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) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 105A00031027

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION
05 MAY 10 AM 7:30

ARTICLE I NAME

The name of the corporation shall be:

Schwinn Law Firm, P. A.

EFFECTIVE DATE
6-1-05

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8695 College Parkway, Suite 307
Ft. Myers, FL 33919

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Law Firm

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):

Christina Harris Schwinn - Director
3113 SW 22nd Place
Cape Coral, FL 33914

ARTICLE VI REGISTERED AGENT

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

Christina Harris Schwinn
3113 SW 22nd Place
Cape Coral, FL 33914

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christina Harris Schwinn (address is the same as above)

ARTICLE VIII Effective Date: June 1, 2005

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

4/20/05
Date



Signature/Incorporator

4/20/05
Date