## D6990

(Re	equestor's Name)		
(Ac	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phon	e #)	
	_	_	
PICK-UP	MAIT	MAIL	
	ısiness Entity Nar	me)	
(= -	<b>--</b>	··- <b>/</b>	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

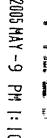
Office Use Only

691-621-619 W05-23687

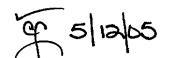


800053658068

05/09/05--01055--011 \*\*78.75







## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

2005 MAY -9 PM 1: 10

F. William Harrey, PA	TALL ATTAGE TESTINGT	
	Art of Inc. File	
	LTD Partnership File	
	Foreign Corp. File	
	L.C. File	
	Fictitious Name File	
	Trade/Service Mark	
	Merger File	
	Art. of Amend, File	
	RA Resignation	
j	Dissolution / Withdrawal	
	Knnual Report / Reinstatement	
	Cert. Copy	
	Photo Copy	
	Certificate of Good Standing	
	Certificate of Status	
	Certificate of Fictitious Name	
	Corp Record Search	
ļ	Officer Search	
	Fictitious Search	
Signature	Fictitious Owner Search	
	Vehicle Search	
/	Driving Record	
Requested by: 5/9 /-00	UCC 1 or 3 File	
Name Date Time	UCC 11 Search	
	UCC 11 Retrieval	
Walk-In Will Pick Up	Courier	



2005 MAY -9 PM 1: 10
TALLAHASSEE FLORIDA

May 10, 2005

CAPITAL CONNECTION INC. 417 E. VIRGINIA STREET SUITE 1 TALLAHASSEE, FL 32301 **RE-SUBMIT**PLEASE OBTAIN THE ORIGINAL
FILE DATE

SUBJECT: F. WILLIAM HARVEY, P.A.

Ref. Number: W05000023687

We have received your document for F. WILLIAM HARVEY, 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):

The document must state the number of shares of authorized stock.

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6973.

Claretha Golden Document Specialist New Filings Section

Letter Number: 205A00033510



In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	Mana Lange Land
ARTICLE I NAME	2005 MAY -9 PM 1:11
The name of the corporation shall be:	PALOUL IMITE UP STATE
F. William Harvey, P.A.	TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE	e de la companya de
The principal place of business/mailing address is:  5310 NW 33 avenue, Suite 100B,	F. Lauderdale, Fl
	33309
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
LAW OFFICE	
ARTICLE IV SHARES	
The number of shares of stock is:	· · · · · · · · · · · · · · · · · · ·
1 Share —	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	the second second second
F-William Harvey 5310 NW 33 avenue, Suite 1008	
5310 NW 33 avenue, Suite 1008	
Ft. Lauderdal, Fel. 33309.	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> of the registered agent is:	
F. William Harvey, Esquire 5310 NW 33 avenue, Suite 1008, +	4. Landerdele, Fl
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	·
F. William Harvey 5310 N.W. 33rd Avenue, Suite 100B	
Ft. Lauderdale, Florida 33309	
***************	*******
laving been named as registered agent to accept service of process for the above stated corporation ertificate, I am familiar with and accept the appointment as registered agent and agree to act in thi	
the same of the sa	=1=10=
Signature/Registered Agent	Date
	1-10-10-10-10-10-10-10-10-10-10-10-10-10
They	5   5   0 S Date
Signature/Incorporator	