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J. Shivers AUG 05 2005

TRANSMITTAL LETTER

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

SUBJECT: The Law Offices of Christopher J. Jacobs, PA
(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:

Christopher J. Jacobs
Name (Printed or typed)

PO Box 6452
Address

Vero Beach, FL 32961
City, State & Zip

772-633-2707
Daytime Telephone number

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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:

The Law Offices of Christopher J. Jacobs, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO Box 6452
Vero Beach, FL 32961

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Legal Services

ARTICLE IV SHARES ☐

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President - Christopher J. Jacobs

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ARTICLE VI REGISTERED AGENT ☐

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

~~Christopher J. Jacobs~~
~~2044~~ 14th Ave., Ste. 25
Vero Beach, FL 32961

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christopher J. Jacobs
PO Box 6452
Vero Beach, FL 32961

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

7/27/05

Signature Incorporator

Date

7/27/05