| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| ` <i>,</i>                              |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| (Oregodato/Lipit Hotic H)               |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
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Office Use Only



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# **COVER LETTER**

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06 SEP 28 AM 9:38

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| SUBJECT: Linds         | ay Glazer, P.A.                             |  | 4   |
|------------------------|---|--|---|
|                        | (PROPOSED CORPORAT                          | TE NÂME – <u>MUST INCL</u>                         | UDE SUFFIX)   |
| Enclosed are an origin | nal and one (1) copy of the artic           | cles of incorporation and                          | l a check for:  |
| S70.00 Filing Fec      | ▼\$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: Lin              | dsay Glazer                                 |  |   |
|                        | Name  | (Printed or typed)                                 |   |
| 1                      | 1413 20 Street, Unit 1                      | 12   |   |
| _                      | P   | Address  |   |
| ı                      | Miami Beach, Florida 3                      |  |   |
| _                      | City,                                       | State & Zip  |   |
| 3                      | 05-807-1332                                 |  |   |
| _                      | Daytime T                                   | elephone 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)

# ARTICLE I NAME

The name of the corporation shall be:

Lindsay Glazer, P.A.

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

# ARTICLE II \_ PRINCIPAL OFFICE

The principal place of business/mailing address is:

1413 SW 20 Street, Unit 112 Miami Beach, Florida 33139

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The practice of law and ancillary services

# ARTICLE IV SHARES

The number of shares of stock is: 1,000

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President: Lindsay Glazer, Vice President: Lindsay Glazer, Treasurer: Lindsay Glazer, Secretary: Lindsay Glazer

#### ARTICLE VI REGISTERED AGENT

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

Lindsay Glazer 1413 20 Street, Unit 112 Miami Beach, Florida 33139

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lindsay Glazer 1413 20 Street, Unit 112 Miami Beach, Florida 33139

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

Signature/Incorporator

111

Date