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COVER LETTER

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

SUBJECT:	Ryan	<u>M</u> . N	/lynard,	Attorney	at Law,	P.A.
		(1	PROPOSED	CORPORATE	NAME - MU	ST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
₹70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Cop & Certificate Status PY REQUIRE
FROM: R	yan Mynard Name	(Printed or typed)	·
	107 Golf Course Drive		
-	P	Address	
_	Crestview, Florida 3253		
-	City,	State & Zip	
((850) 951-2405		
•	Daytime T	elephone number	

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

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

ARTICLE I NAME

The name of the corporation shall be:

Ryan M. Mynard, Attorney at Law, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

296 South Ferdon Boulevard, Suite 5 Crestview, FL 32536

Post Office Box 249 Crestview, FL 32536

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):

Ryan M. Mynard - President and Chairman of the Board of Directors

ARTICLE VI REGISTERED AGENT

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

Ryan M. Mynard 296 South Ferdon Boulevard Suite 5 Crestview, FL 32536

ARTICLE VII __ INCORPORATOR

The name and address of the Incorporator is:

Ryan M. Mynard 107 Gold Course Drive Crestview, FL 32536

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

9-29-06 Date 9-29-06

Date