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(Requestor's Name)			
(Ad	dress)		
(Ad	dress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
	-	_,	
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			
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CURETARY OF STATE
LLAHASSEF FIRE

COVER LETTER

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

SUBJECT: Marvin Klasfeld, CPA, P.A.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)				
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	✓ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: Marvin Klasfeld				
Name (Printed or typed)				
817 South University Drive, Suite 100				
Address				
Plantation, FL 33324				
City, State & Zip				
954-476-6700 Daytime Te	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:

Marvin Klasfeld, CPA, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

817 South University Drive, Suite 100, Plantation, FL 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Certified Public Accountant

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):

Marvin Klasfeld, President 817 South University Drive, Suite 100, Plantation, FL 33324

ARTICLE VI REGISTERED AGENT

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

Marvin Klasfeld 817 South University Drive, Suite 100, Plantation, FL 33324

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Marvin Klasfeld 817 South University Drive, Suite 100, Plantation, FL 33324

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/Incorporator

| 1/5/07 | Date | 1/5/07 |
| Signature/Incorporator | Date |

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