

707000009470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

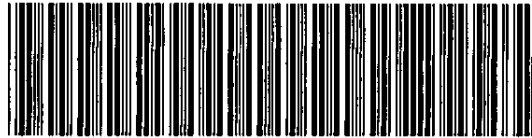
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400082669064

01/22/07--01008--002 \*\*78.75

FILED  
07 JAN 22 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

J. Shivers JAN 23 2007

## COVER LETTER

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

**SUBJECT:** Michael Tangeman & Associates, Inc.

(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:** Michael Tangeman & Associates, Inc.

Name (Printed or typed)

800 West Avenue, Suite 809

Address

Miami Beach, FL 33139

City, State & Zip

(786) 210-3412

Daytime Telephone number

FILED  
07 JAN 22 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

Michael Tangeman & Associates, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

Principal place of business: 800 West Avenue, Suite 809, Miami Beach, FL 33139

Mailing address: P.O. Box 140717, Coral Gables, FL 33134-0717

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

## **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):

Michael A. Tangeman (President)

800 West Avenue, Suite 809

Miami Beach, FL 33139

## **ARTICLE VI REGISTERED AGENT**

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

Michael A. Tangeman

800 West Avenue, Suite 809

Miami Beach, FL 33139

## **ARTICLE VII INCORPORATOR**

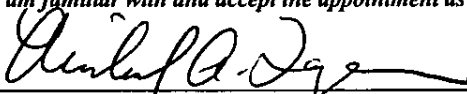
The name and address of the Incorporator is:

Michael A. Tangeman

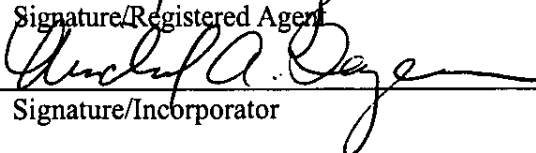
800 West Avenue, Suite 809

Miami Beach, FL 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

01-19-07

Date

01-19-07

Date

FILED  
07 JAN 22 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA