

PD7000010362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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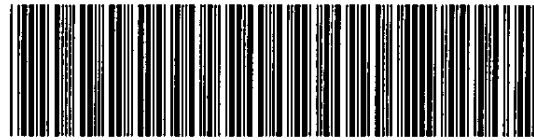
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 JAN 23 PM 3:06

MTD 1/24

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## COVER LETTER

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

SUBJECT: Tina<sup>M.</sup> Willis, P.A.  
(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: Tina M. Willis  
Name (Printed or typed)

P.O. Box 771031  
Address

Winter Garden, FL 34777  
City, State & Zip

407-383-7290  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 29, 2006

TINA M. WILLIS  
P. O. BOX 771031  
WINTER GARDEN, FL 34777

SUBJECT: TINA M. WILLIS, P.A.  
Ref. Number: W06000055566

We have received your document for TINA M. WILLIS, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham  
Document Specialist  
New Filing Section

Letter Number: 706A00073065

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JAN 23 PM 3:07

**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:

Tina M. Willis, P.A.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

235 S. Boyd St.  
Winter Garden, FL 34787

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Practice Immigration Law and/or do research and writing  
for attorneys in other practice areas.

**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):

Tina Willis, President  
P.O. Box 771031  
Winter Garden, FL 34777

**ARTICLE VI REGISTERED AGENT**

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


Tina Willis  
235 S. Boyd St.  
Winter Garden, FL 34787

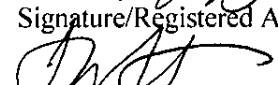
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Tina Willis  
P.O. Box 771031  
Winter Garden, FL 34777

\*\*\*\*\*  
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

Dec. 21, 2006  
\_\_\_\_\_  
Date

Dec. 21, 2006  
\_\_\_\_\_  
Date