

P07000055210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

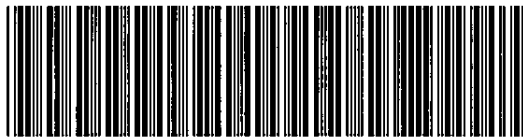
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2007 MAY -8 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

07 MAY -8 PM 3:53

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

T. Hampton MAY - 9 2007

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Michelle Borst Architect, P.A.

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

☒ Art of Inc. File

☐ LTD Partnership File

☐ Foreign Corp. File

☐ L.C. File

☐ Fictitious Name File

☐ Trade/Service Mark

☐ Merger File

☐ Art. of Amend. File

☐ RA Resignation

☐ Dissolution / Withdrawal

☐ Annual Report / Reinstatement

☒ *Doc* Copy

☐ Photo Copy

☒ Certificate of Good Standing

☐ Certificate of Status

☐ Certificate of Fictitious Name

☐ Corp Record Search

☐ Officer Search

☐ Fictitious Search

☐ Fictitious Owner Search

☐ Vehicle Search

☐ Driving Record

☐ UCC 1 or 3 File

☐ UCC 11 Search

☐ UCC 11 Retrieval

☐ Courier

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:

MICHELE BORST ARCHITECT, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4926 NW 19th PLACE
GAINESVILLE, FL 32605

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PRACTICE THE PROFESSION OF ARCHITECTURE

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHELE Z. BORST, 4926 NW 19th Place, Gainesville, FL 32605, President, Treasurer & Director

ARTICLE VI REGISTERED AGENT

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

MICHELE Z. BORST
4926 NW 19th Place
Gainesville, FL 32605

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHELE Z. BORST
4926 NW 19th Place
Gainesville, FL 32605

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

Michele Borst

Signature/Registered Agent

Michele Borst

Signature/Incorporator

FILED

2007 MAY -8 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 7, 2007
Date

May 7, 2007
Date