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COVER LETTER

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

SUBJECT: Law Office of Russell B. Poole, P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
_{FROM} . R	ussell B. Poole		
		e (Printed or typed)	
	or ritioasion outcor	Address	
	Green Cove Springs,	FL 32043	
		, State & Zip	

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:

Law Office of Russell B. Poole, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 511 Houston Street Green Cove Springs, FL 32043

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Attorney Office

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):

President Russell B. Poole 511 Houston Street Green Cove Springs, FL 32043

ARTICLE VI REGISTERED AGENT

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

Russell B. Poole 511 Houston Street Green Cove Springs, FL 32043

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Russell B. Poole 511 Houston Street

Green Cove Springs, FL 32043

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

09/28/2007

Date

09/28/2007

Date

Signature/Incorporator

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