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| Certified Copies | _ Certificate: | s of Status | |
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| Special Instructions to | Filing Officer | | |
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Office Use Only



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SECRETARY OF STAIL

16-11-21

COVER LETTER

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

| SUBJECT: Baro | ne Law Co. | | |
|----------------------|--|--|---|
| | (PROPOSED CORPORA | ATE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | l a check for: |
| \$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 DPY REQUIRED |
| FROM: Jo | Ann Barone Kotzen | | |
| | Name | e (Printed or typed) | _ |
| | 500 South Australian | | or |
| | W. Palm Beach, Fl 33 | Address 401 , State & Zip | |
| | (561) 651-4140 | To I amb an a mark to - | |
| | Daytime 1 | Telephone 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)

FILED

2007 NOV 20 PM 2: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Barone Law Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

500 South Australian Avenue, Sixth Floor W. Palm Beach, FL 33401

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Professional Corporation To provide legal services in the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

Five (5)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jo Ann Barone Kotzen 500 S. Australian Ave., 6th flr. WPB, FL 33401

is a muary 1, 2008.

| ARTICLE VI REGISTERED AGENT | · ILED |
|---|--|
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT as Jo Ann Barone Kotzen | cceptable) of the registered agent (1887) NOV 20 |
| Jo Ann Barone Kotzen | ora PH 2: 45 |
| 500 S. Australian Ave., 6th Flr. | TALLACTARY DE CT. |
| WPB, FL 33401 | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: | |
| Jo Ann Barone Kotzen | • |
| 500 S. Australian Ave., 6th flr. | |
| WPB, FL 33401 | |
| *************************************** | ******** |
| Having been named as registered agent to accept service of proces certificate, I am familiar with and accept the appointment as registe | |
| Offsh Flam | 11.15.2007 |
| Signature/Registered Agent | Date |
| Mohitzer | 11.15.2007 |
| Signature/Incorporator | Date |