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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

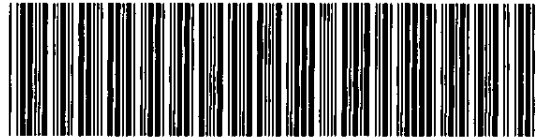
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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08 JAN 24 PM 3:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
1/25

**COVER LETTER**

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

**SUBJECT:** Sherry F. Chancellor, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Sherry F. Chancellor, P.A.  
Name (Printed or typed)

P.O. Box 2714  
Address

Pensacola, FL 32513  
City, State & Zip

850 341 7599  
Daytime 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)

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**ARTICLE I NAME**

The name of the corporation shall be:

**Sherry F. Chancellor, P.A.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
900 N. Palafox Street, Pensacola, FL 32501

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
For the practice of law

**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: Sherry F. Chancellor, 900 N.  
Palafox Street, Pensacola, FI 32501

Secretary/Treasurer: Sherry F. Chancellor,  
900 N. Palafox Street, Pensacola, FI 32501

**ARTICLE VI REGISTERED AGENT**

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

Sherry F. Chancellor, 900 N. Palafox Street, Pensacola, FI 32501

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Sherry F. Chancellor, 900 N. Palafox Street, Pensacola, FI 32501

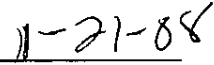
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



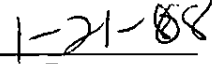
Signature/Registered Agent



Date



Signature/Incorporator



Date