

16
P08000049388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

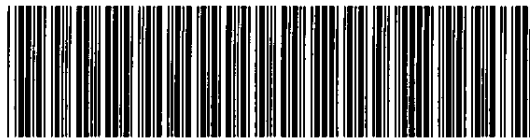
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800129584788

05/16/08--01020--011 **87.50

FILED

2008 MAY 16 PM 3:36

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

cf. 5-16

COVER LETTER

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

SUBJECT: Paola Parra, Professional Association

(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: Paola Parra

Name (Printed or typed)

1860 Epping Forest Way South

Address

Jacksonville, FL 32217

City, State & Zip

904-398-9002

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)

FILED

2008 MAY 16 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Paola Parra, Professional Association

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1860 Epping Forest Way South
Jacksonville, FL 32217

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct child custody evaluations.

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):

Paola Parra - 1860 Epping Forest Way South, Jacksonville, FL 32217 - President and Secretary

ARTICLE VI REGISTERED AGENT

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

Paola Parra - 1860 Epping Forest Way South, Jacksonville, FL 32217

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paola Parra - 1860 Epping Forest Way South, Jacksonville, FL 32217

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 Paola Parra

Signature/Incorporator Paola Parra

5/13/08

Date

5/13/08

Date