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2008 JUN -9 PM 4: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUN 10 2008

COVER LETTER

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

SUBJECT: Lisa F. Santos, 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

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Lisa F. Santos
Name (Printed or typed)

2825 N. University Drive Suite 350
Address

Coral Springs, FL 33065
City, State & Zip

(561) 763-2122
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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2008 JUN -9 PM 4: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

LISA F. SANTOS, P.A.

ARTICLE II PRINCIPAL OFFICE

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

2825 N. UNIVERSITY Drive
Suite 350
Coral Springs, FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LAW FIRM

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):

LISA F. SANTOS, Pres./Dir.
2825 N. UNIVERSITY Drive
Suite 350
Coral Springs, FL 33065

ARTICLE VI REGISTERED AGENT

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

LISA SANTOS
2825 N. UNIVERSITY Drive - Suite 350
Coral Springs, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LISA SANTOS
2825 N. UNIVERSITY Drive - Suite 350
Coral Springs, FL 33065

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