

## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6381

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : I20000000257

Phone : (850)224-8870 Fax Number : (850)222-1222

## FLORIDA PROFIT/NON PROFIT CORPORATION

Chadwick & Kobal, P.A.

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Page Count	03
Estimated Charge	\$78.75

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# ARTICLES OF INCORPORATION OF

### Chadwick & Kobal, P.A.

200 SEP 30 PN 4: 15

The undersigned incorporator, for the purpose of forming a Professional Association under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I: NAME & PURPOSE

The name of the Professional Association is Chadwick & Kobal, P.A. The specific nature of business of this Professional Association is legal services.

#### ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the Professional Association is 14041 North Dale Mabry Hwy., Suite B, Tampa FI 33618.

#### ARTICLE III: CAPITAL STOCK

The number of shares of stock that this Professional Association is authorized to have outstanding at any one time is one thousand (1,000) shares having par value of (\$1.00) per share.

## ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Jason Kobal, 14041 North Dale Mabry, Suite B, Tampa Fl 33618.

#### ARTICLE V: INITIAL OFFICERS AND DIRECTORS

The name and address of the initial Officers and Directors of the Professional Association are: Robert Chadwick, President., 14041 North Dale Mabry Hwy., Suite B, Tampa Fl 33618.

Jason Kobal, Vice President & Treasurer., 14041 North Dale Mabry Hwy., Suite B, Tampa Fl 33618.

Jill Fedewa. Secretary., 14041 North Dale Mabry Hwy., Suite B, Tampa Fl 33618.

#### ARTICLE VI: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

The undersigned has executed these Articles of Incorporation this 29th day of September 2008. "Your Capital Connection, Inc. by, Seth Neeley, Client Representative"

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the organized under the laws of the state of Florida, submits the following the registered office/registered agent, in the state of Florida.	
1, The name of the corporation is: CHANDICK + KC	BRIL, P.A.
	· .
2. The name and street address of the registered agent and office is	JASON Kobal
14041 North Dale Mabry	Soite B
TAMPA, FL 33618	<u> </u>
HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACC	

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I PEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I PURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.