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SECRETARY OF STATE
TALL AHASSEF. FLORIDA

COVER LETTER

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

SUBJECT: Lindsey	Pickel, P.A.		
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an orig	ginal 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 o Status PPY REQUIRED
FROM: Li	ndsey Pickel		
	Name	(Printed or typed)	
	205 South Matanzas Avenue	Address	
	Tampa, FL 33609	, State & Zip	
	(813) 846-1827	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)

ARTICLE I NAME

The name of the corporation shall be:

Lindsey Pickel, P.A.

ARTICLE II PRINCIPAL OFFICE

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

205 South Matanzas Avenue Tampa, FL 33609

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Practicing law

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Lindsey Pickel, President 205 South Matanzas Avenue Tampa, FL 33609

ARTICLE VI REGISTERED AGENT

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

Lindsey Pickel 205 South Matanzas Avenue Tampa, FL 33609

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Lindsey Pickel 205 South Matanzas Avenue Tampa, FL 33609

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

Signature/Incorporator

Date 10/17/08

Date

SECRETARY OF STATE

TILED