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# **COVER LETTER**

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

SUBJECT: Peggy	L. Wagner, P.A. (PROPOSED CORPOR	ATE NAME – MUST INCI	JUDE 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	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED
FROM: Pe	eggy L. Wagner		
7 HOW	Name	(Printed or typed)	<del></del>
	8962 SE Ceres Street	Address	
	Hobe Sound, FL 33455	v, State & Zip	<del></del>
	772-486-0915	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:

Peggy L. Wagner, P.A.

### ARTICLE II PRINCIPAL OFFICE

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

8962 SE Ceres Street, Hobe Sound, FL 33455

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Certified Public Accounting Practice

### ARTICLE IV SHARES

The number of shares of stock is:

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Peggy L. Wagner 8962 SE Ceres Street Hobe Sound, FL 33455 President

### ARTICLE VI REGISTERED AGENT

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

Peggy L. Wagner 8962 SE Ceres Street Hobe Sound, FL 33455

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Signature/Incorporator

Peggy L. Wagner

8962 SE Ceres Street Hobe Sound, FL 33455

Hobe Sound, FL 33455	
*************	**********
Having been named as registered agent to accept service of process for a vertificate, I am familiar with and accept the appointment as registered age	
Pro & Worn	10/31/08
Signature/Registered Agent	Date
Yuan & Magn	10/31/08

Date

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