P09000019542

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phon	e #)	
PICK-UP WAIT	MAIL	
(Business Entity Nar	ne)	
(Document Number)		
Certified Copies Certificates	s of Status	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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COVER LETTER

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

SUBJECT:	Simo	ne Lennor	, P.A.
Enclosed are an orio			
\$70.00	inal and one (1) copy of the artic \$78.75 Filing Fee & Certificate of Status	Sees of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:		none Lennor (Printed or typed) 5 Frisco D Address	
Clearwater, F1 33761 City, State & Zip 813-765-2555 Daytime Telephone number			

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



February 20, 2009

SIMONE LENNON 2645 FRISCO DR CLEARWATER, FL 33761

SUBJECT: SIMONE LENNON, P.A. Ref. Number: W09000008110

We have received your document for SIMONE LENNON, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 309A00006031

Paisley A Alford Clerk New Filing Section

Division of Cornerations - P.O. BOX 6327 - Tallahassee, Florida 32314

gr gray	
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:	
Simone Lennon, P.A.	
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	
59me Clearwater, F1 3376)	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	: 00
law firm	
ARTICLE IV SHARES	- 2
The number of shares of stock is:	V(
100	*************************************
	्रा इ इ .
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	e
Simone Lennon	
21HS Frisco Dr	
Clearwater, F1 33761	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the register	red agent is:
Simone Lennon	
2645 Frisco Dr	
ARTICLE VII INCORPORATOR	•
The <u>name and address</u> of the Incorporator is:	
Simone Lennon 21045 Frisco Dr	•
Clearwater, = 1 33761	***********
Having been named as registered agent to accept service of process for the above stated corpo	pration at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent and agree to act in	
Vimore Linnon	2-16-9
Signature/Registered Agent	Data

Signature/Incorporator

2-16-9

Date