

P09000029359

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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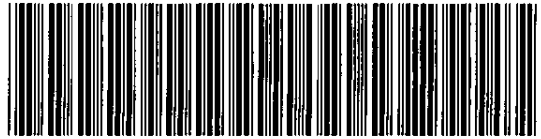
(Business Entity Name)

(Document Number)

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02/24/09--01027--013 \*\*87.50

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 MAR 27 AM 11:52

630  
W09-9126

JS

MD 4/1

## COVER LETTER

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

**SUBJECT:** Theresa Mains, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Theresa Mains

Name (Printed or typed)

8817 NW 51 Place

Address

Coral Springs, Florida 33067

City, State & Zip

954-520-1775

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 26, 2009

THERESA MAINS  
8817 NW 51 PLACE  
CORAL SPRINGS, FL 33067

SUBJECT: THERESA MAINS, P.A.  
Ref. Number: W09000009126

We have received your document for THERESA MAINS, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

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) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 009A00006729

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DEPARTMENT OF STATE  
09 MAR 27 AM 10:47

## 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:

Theresa Mains, P.A.

### ARTICLE II PRINCIPAL OFFICE

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

8817 NW 51 Place  
Coral Springs, Florida 33067

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Conduct business under the laws of the state of Florida including Consulting, Forensic Accounting, Private Investigations.

### ARTICLE IV SHARES

The number of shares of stock is:

100 Shares of Class 1 common stock, par value \$0.01

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Theresa Mains, President  
8817 NW 51 Place  
Coral Springs, Florida 33067

### ARTICLE VI REGISTERED AGENT

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

Richard Mains  
8817 NW 51 Place  
Coral Springs, Florida 33067

### ARTICLE VII INCORPORATOR

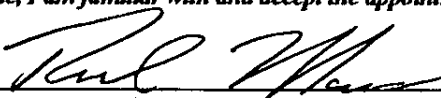
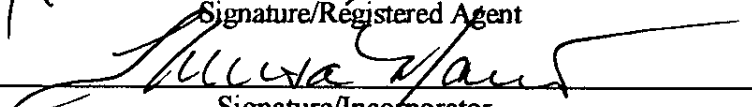
The name and address of the Incorporator is:

Theresa Mains  
8817 NW 51 Place  
Coral Springs, Florida 33067

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DIVISION OF CORPORATIONS  
09 MAR 27 AM 11:52

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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

X   
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

3/6/09  
\_\_\_\_\_  
Date  
3/6/09  
\_\_\_\_\_  
Date