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COVER LETTER

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

SUBJECT:	LORI A. BALONA, P.A.			
	(PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Lori Balona Name (Printed or typed)			
	5813 S. MacDill Ave			
	-			
	Tampa, FI 33611 City, State & Zip			
		3-310-6362 Telephone number		
·	E-mail address: (to be use	ed for future annual report	notification)	

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: LORI A. BALONA, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 5813 S. MacDill Ave.
Tampa, FL. 33611-4450

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LAW FIRM

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):

Lori A. Balona (P) 5813 S. MacDill Ave.

Tampa, FL. 33611-4450

ÂRTICLE VI REGISTERED AGENT

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

Lori A. Balona

5813 S. MacDill Ave.

Tampa, FL 33611-4450

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lori A. Balona, Esq. 5813 S. MacDill Ave.

Tampa, FL. 33611-4450

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

Obr. A. Balona	7/8/09
Signature/Registered Agent	Date
Sori A. Balona	7/8/09
Signature/Incorporator	Date