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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
8/28

COVER LETTER

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

SUBJECT: Law Office of Daniel W. Hamilton, 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Daniel W. Hamilton
Name (Printed or typed)

P.O. Box 89788
Address

Tampa, FL 33689
City, State & Zip

813-365-0999
Daytime Telephone number

dh@dhlawoffice.com
E-mail address: (to be used 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:

Law Office of Daniel W. Hamilton, P.A.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

1115 Professional Park Drive, Brandon, FL 33511

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide legal services as a law firm.

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Daniel W. Hamilton
P.O. Box 89788
Tampa, FL 33689-0413

ARTICLE VI REGISTERED AGENT

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

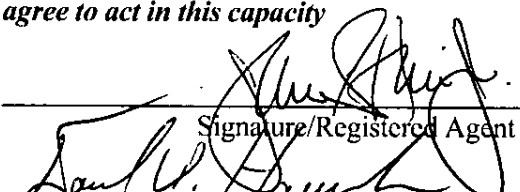
James P. Harris
1115 Professional Park Drive
Brandon, FL 33511

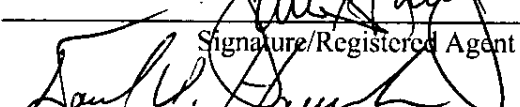
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

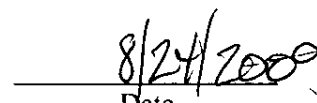
Daniel W. Hamilton
P.O. Box 89788
Tampa, FL 33689

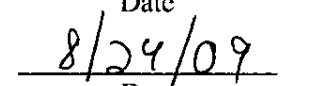
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator



Date


Date