P09000083383

(Requestor's Name)			
, , ,			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(Boodine) (Book (Book)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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W09-39866			

Office Use Only



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09/02/09--01012--017 **78.75

COVER LETTER *

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

SUBJECT:	Nive P. Cha PROPOSED CORPORA	usse, P.A.		
	(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)	
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 ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Number P. Chausse Name (Printed or typed)				
2204 SW 40th Terv Address				
·	Cay City,	re Coval, FL State & Zip	33914	
	239-	898-2341		
	Daytime Te	elephone number		
	SWWSSE E-mail address: (to be used	COMCAST.		

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



RECEIVED 09 SEP 14 PM 12: 07

FLORIDA DEPARTMENT OF STATE MENT OF STATE Division of Corporations FALLAHASSEE, FLORIDA

September 3, 2009

NICOLE P. CHAUSSE 2204 SW 40TH TERR CAPE CORAL, FL 33914

SUBJECT: NICOLE P. CHAUSSE, P.A.

Ref. Number: W09000039866

We have received your document for NICOLE P. CHAUSSE, P.A. and your check(s) totaling \$78.75. 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.

A copy of a license or other legal authorization verifying the rendering of a personal service must accompany your articles of incorporation as a professional association.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

You must list at least one incorporator with a complete business street address.

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) 245-6928.

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Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 309A00029554



September 16, 2009

NICOLE P. CHAUSSE 2204 SW 40TH TERR CAPE CORAL, FL 33914

SUBJECT: NICOLE P. CHAUSSE, P.A.

Ref. Number: W09000039866

We have received your document for NICOLE P. CHAUSSE, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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) 245-6928.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 909A00030468

OPPARIMENT OF STATE

VISION OF CORPORATION

TALL MINASSEE TO STATE

TALL MINASSEE

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME	
Nicole P. Chausse, P.A.	2009 OCT SECRETALLAHA
ARTICLE II PRINCIPAL OFFICE	SA -
2204 SW HOTE TEN	TOP ア
Cape Coral, FL 33914	TATE ORIDA
ARTICLE III PURPOSE	
P.A. Independent Contractor	
Real Estate	
ARTICLE IV SHARES	
1	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	<u>ors</u>
Nicole P. Chuisse 2204 SW 404 Terrace	
Cape Coval FL 33914 ARTICLE VI REGISTERED AGENT	
Nucôte P. Chaussp	
2204 SW 404 Jeru	
Cape Coral, FL 33914	
ARTICLE VII INCORPORATOR	
Nicole P. Chausse	
2204 SWHOTL Terrace	
Cape Coral, PC 33914	
*********	*******
Having been named as registered agent to accept service of pro- place designated in this certificate, I am familiar with and acce- agree to act in this capacity	
	<u> </u>
i vove Chausse	9/02/09
Signature/Registered Agent Washe Chausse	Date 9/2/00
- v VI/T V 2 / C	

Signature/Incorporator

9/22/09

Date