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SECRETARY OF STAIL
DIVISION OF CORPORATION

7099 DEC 28 AM II: 34

of 12/29/09

COVER LETTER

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

osed are an orig	inal and one (1) copy of the art	ticles 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 PY REQUIRED
	•		
FROM: The	omas J. Sherwood		····
	Nam	e (Printed or typed)	
	. Box 5512		
P.C		A d'dusca	_
<u>P.C</u>		Address	
	City Center, Fl.33571		
	City Center, Fl.33571	, State & Zip	
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Sur	City Center, Fl.33571 City,		
Sur (81:	City Center, Fl.33571 City,	, State & Zip	

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 1 NAME

The name of the corporation shall be: Thomas J. Sherwood, P.A.

ARTICLE II PRINCIPAL OFFICE

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

Street address: 11524 Hwy 92E Mailing Address: P.O. Box 5512

Seffner, Fl.33584 Sun City Center, Fl.33571

ARTICLE III PURPOSE

The provision of legal services as an attorney at law.

ARTICLE IV SHARES

The number of shares of stock is 100.

ARTICLE V INITIAL OFFICERS AND DIRECTORS

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

Thomas J. Sherwood- Director 11524 Hwy 92E Seffner, Fl.33584

ARTICLE VI REGISTERED AGENT

The <u>name and street address</u> of the registered agent is:

Thomas J. Sherwood 11524 Hwy 92 E Seffner, Fl.33584 Having been named as registered agent to accept service of process for the above stated corporation as 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

homas J. Shorwood

Signature/Incorporator

Thomas J. Sherwood

12/24/09 Date

12/24/19 Date

2009 DEC 28 BM 11-31