

FILED  
2010 FEB - 1 PM 1:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** C.L. Shropa & Associates, 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:** Christopher L. Shropa

Name (Printed or typed)

481 SW Petersburg Terrace

Address

Plantation, Florida 33325

City, State & Zip

954.294.6902

Daytime Telephone number

christopher.shropa@msn.com

E-mail address: (to be used for future annual report notification)

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

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**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: C.L. Shropa & Associates, P.A.

**ARTICLE II PRINCIPAL OFFICE**

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

300 NW 70<sup>th</sup> Avenue, Suite 205  
Plantation, Florida 33317

**ARTICLE III PUROSE**

The purpose for which the corporation is organized is: To provide legal services to the citizens of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s): Christopher Lance Shropa, President and Director

**ARTICLE VI REGISTERED AGENT**

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

Christopher L. Shropa  
300 NW 70<sup>th</sup> Avenue, Suite 205  
Plantation, Florida 33317

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Christopher L. Shropa  
300 NW 70<sup>th</sup> Avenue, Suite 205  
Plantation, Florida 33317

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*Having been named as registered agent to accept service pf 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.*

Christopher L. Shropa / CHRISTOPHER L. SHROPA  
Signature/Registered Agent

1.29.10  
Date

Christopher L. Shropa / CHRISTOPHER L. SHROPA  
Signature/Incorporator

1.29.10  
Date