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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-2-10 S

## COVER LETTER

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

**SUBJECT:** The Law Office of Victoria Mintu, 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:** VICTORIA MINTU

Name (Printed or typed)

11250 OLD ST. AUGUSTINE RD, SUITE 217

Address

JACKSONVILLE, FL 32257

City, State & Zip

904-207-9884

Daytime Telephone number

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:

THE LAW OFFICE OF VICTORIA MINTU, P.A.

### **ARTICLE II PRINCIPAL OFFICE**

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

12190 CALIBER COURT, JACKSONVILLE, FL 32258

MAILING ADDRESS: 11250 OLD ST. AUGUSTINE RD.,

P. O. BOX 217, JACKSONVILLE, FL 32257

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Law firm; prof. services limited to the practice of Immigration Law

### **ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

VICTORIA MINTU P, D

11250 OLD ST.  
AUGUSTINE RD., SUITE  
217, JACKSONVILLE, FL  
32257

### **ARTICLE VI REGISTERED AGENT**

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

VICTORIA MINTU

12190 CALIBER CT

JACKSONVILLE, FL 32258

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

VICTORIA MINTU

11250 OLD ST. AUGUSTINE RD., SUITE 217

JACKSONVILLE, FL 32257

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*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*

Victoria Mintu

Signature/Registered Agent

Victoria Mintu

Signature/Incorporator

4-2-2010

Date

4-2-2010

Date

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JACKSONVILLE, FL