

P10000047651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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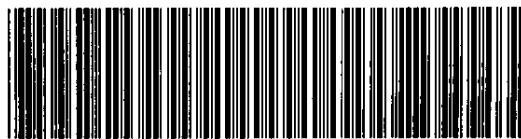
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10 JUN -4 AM 11:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6-7-10 DB

## COVER LETTER

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

SUBJECT: Azam Snytkin, PA  
(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: Nishat Azam  
Name (Printed or typed)

1175 Lake Shadow Circle, Unit 4303  
Address

Maitland, FL 32751  
City, State & Zip

(407) 437-4730  
Daytime Telephone number

Michael.snytkin@gmail.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:

Azam Snytkin, PA

**ARTICLE II PRINCIPAL OFFICE**

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

1175 Lake Shadow Circle, Unit 4303, Maitland, FL 32751

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Law firm

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares

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

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

Michael G. Snytkin, Managing Partner

Nishat Azam, Partner

**ARTICLE VI REGISTERED AGENT**

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

Michael G. Snytkin  
1175 Lake Shadow Circle, Unit 4303- Maitland, FL 32751

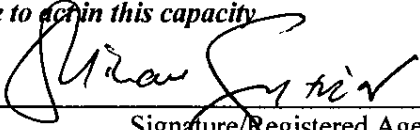
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Nishat Azam  
1175 Lake Shadow Circle, Unit 4303- Maitland, FL 32751

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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



Signature/Registered Agent



Signature/Incorporator

6/1/10

Date

6/1/10

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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