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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETIVELY OF STATE TALLAHASSEE FLORIDA



M

COVER LETTER

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

SUBJECT: Rhonda	Henderson P.A.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles 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
		ADDITIONAL CO	Status PY REQUIRED
EDOM. Bh	onda Henderson		
PROM: 144		e (Printed or typed)	
126	9 Tipperary Drive	Address	
		Addiess	
Mel	bourne, FL 32940		
	City,	State & Zip	
321	-505-9253		
	Daytime 7	elephone number	
Ωho	ndahendersonesq@gmail.com		
1110		d for future annual report r	notification)

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





FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2010

RHONDA HENDERSON 1269 TIPPERARY DRIVE MELBOURNE, FL 32940

SUBJECT: RHONDA HENDERSON P.A.

Ref. Number: W10000039893

We have received your document for RHONDA HENDERSON P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6962.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 510A00020269



ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)



10 SEP 20 PM 4: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Rhonda Henderson P.A.

<u>ARTICLE II PRINCIPAL OFFICE</u>

The principal <u>street</u> address and mailing address, if different is: 895 Barton Blvd Ste B
Rockledge, FL 32955

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is: Legal services

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):

Rhonda

895 Barton Blvd Ste Member/Agent

Henderson

Rockledge, FL 32955

ARTICLE VI REGISTERED AGENT

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

895 Barton Blvd Ste B, Rockledge, FL 32955

Rhonda Henderson

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

895 Barton Bivd Ste B, Rockledge, FL 32955

Rhonda Henderson

**************************************	f process for the above stated corporation at the
agree to act in this capacity	9/17/2010
Signature/Registered Agent	Date 9/17/2010
Signature Undorporator	Date