

P100000090464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

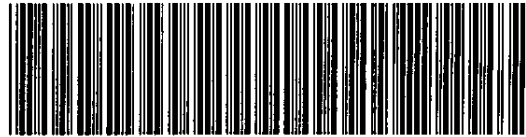
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200187226922

11/04/10--01027--007 \*\*70.00

FILED  
2010 NOV -4 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch NOV. 8. 2010

## COVER LETTER

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

SUBJECT: PHILLIPS LAW FIRM, 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: DANIEL I. PHILLIPS  
Name (Printed or typed)  
1413 NORTH RANDOLPH CIRCLE  
Address  
Tallahassee, FL 32308  
City, State & Zip  
850-228-3749  
Daytime Telephone number  
Danny.phillips2@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:

PHILLIPS LAW FIRM, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1413 NORTH RANDOLPH CIR.  
Tallahassee, FL 32308

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROVIDE LEGAL SERVICES

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Danny Phillips PRESIDENT  
Address: 1413 N. RANDOLPH CIRCLE  
Tallahassee, FL 32308

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Danny Phillips  
Address: 1413 N. RANDOLPH CIRCLE  
Tallahassee, FL 32308

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Danny Phillips  
Address: 1413 NORTH RANDOLPH CIR.  
Tallahassee, FL 32308

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]  
Required Signature/Registered Agent

11-1-10  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]  
Required Signature/Incorporator

11-1-10  
Date

FILED  
2010 NOV -4 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA