

P10000101157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

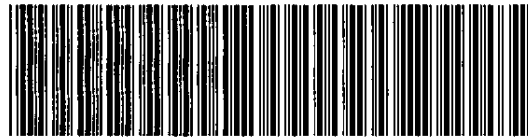
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100188431921

12/15/10--01012--011 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 DEC 15 AM 9:10

FILED

J. Shivers DEC 16 2010

COVER LETTER

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

SUBJECT: Law Offices of Michelle A. Berglund, 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: Michelle A. Berglund
Name (Printed or typed)

5182 Millenia Blvd. #305
Address

Orlando, FL 32839
City, State & Zip

321-948-8824
Daytime Telephone number

michelleberglund@me.com
E-mail address: (to be used for future annual report notification)

FILED
2010 DEC 15 AM 9:10
TALLAHASSEE, FLORIDA

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: LAW offices of Michelle A. Berglund, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
105 E. Robinson St Suite 201
Orlando, FL 32801

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide legal services

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michelle Berglund - President Name and Title: _____
Address: 5182 Millenia Blvd #305 Address: _____
Orlando, FL 32839

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: Michelle Ann Berglund
Address: 5182 Millenia Blvd #305
Orlando, FL 32839

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Michelle Ann Berglund
Address: 5182 Millenia Blvd #305
Orlando, FL 32839

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

Michelle A. Berglund
Required Signature/Registered Agent

12/9/2010
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.

Michelle A. Berglund
Required Signature/Incorporator

12/9/2010
Date

FILED
2010 DEC 15 AM 9:10
TALLAHASSEE, FLORIDA