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2011 FEB 14 AM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2.000000 FEB 15 2011

COVER LETTER

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

SUBJECT: Julia Stulman, 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: Law Office of Alexander Socia, PA

Name (Printed or typed)

3650 N Federal Hwy, Ste 217

Address

Lighthouse Point, FL 33064

City, State & Zip

954-366-5256

Daytime Telephone number

alex@alexsocia.com

E-mail address: (to be used for future annual report notification)

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

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TALLAHASSEE, FLORIDA

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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:

Julia Stulman, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
10003 Diamond Lake Drive
Boynton Beach, FL 33437

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Office of Realtors

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Julia Stulman PVST**
Address:

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:

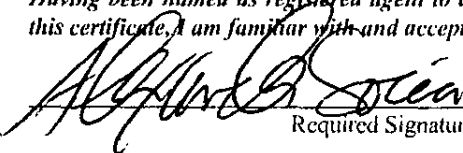
Name: **Alexander Socia, Esq.**
Address: **3650 N Federal Hwy, Ste 217**
Lighthouse Point, FL 33062

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Eric Filkins, CPA**
Address: **440 S Federal Hwy, Ste 207B**
Deerfield Beach, FL 33441

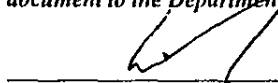
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

2-10-11
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.



Required Signature/Incorporator

2-10-11
Date

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TALLAHASSEE, FLORIDA