

P/1000017203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

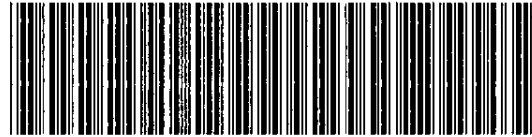
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/16/11--01018--001 **70.00

11 FEB 16 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1/1

COVER LETTER

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

SUBJECT: _____

Haslett Law, 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: _____

Betsy Haslett

Name (Printed or typed)

1875 A Green Springs Circle

Address

Fleming Island, FL 32003

City, State & Zip

(904) 233-0914

Daytime Telephone number

betsyhaslett@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)

APPROVED
AND
FILED

11 FEB 16 PM 3:55

ARTICLE I NAME

The name of the corporation shall be: Haslett Law, P. A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1875 A Green Springs Circle
Fleming Island, FL 32003

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing address, if different is:

P.O. Box 332
Green Cove Springs, FL
32043

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Legal services

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Betsy Haslett, Director

Address: P.O. Box 332
Green Cove Springs, FL
32043

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: Betsy Haslett
Address: 1875 A Green Springs Circle
Fleming Island, FL 32003

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Betsy Haslett
Address: P.O. Box 332
Green Cove Springs, FL 32043

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

Betsy Haslett
Required Signature/Registered Agent

2/12/11
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.

Betsy Haslett
Required Signature/Incorporator

2/12/11
Date