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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 FEB 28 PM 2:35

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AND  
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DK

## COVER LETTER

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

SUBJECT: COLIN CLARENCE, 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: COLIN C. SMALL

Name (Printed or typed)

9314 FOREST HILL BLVD., SUITE 64

Address

WELLINGTON, FL 33411

City, State & Zip

561-843-9590

Daytime Telephone number

COLIN@COLINCLARENCE.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**

COLIN CLARENCE, P.A.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
9314 FOREST HILL BLVD.  
SUITE 64  
WELLINGTON, FL 33411

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
TO PRACTICE CERTIFIED PUBLIC ACCOUNTING

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: COLIN C. SMALL, CEO & PRESIDENT  
Address: 9314 FOREST HILL BLVD.  
SUITE 64  
WELLINGTON, FL 33411

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

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

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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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: COLIN C. SMALL  
Address: 9314 FOREST HILL BLVD, STE 64  
WELLINGTON, FL 33411

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: COLIN C. SMALL  
Address: 9314 FOREST HILL BLVD, STE 64  
WELLINGTON, FL 33411

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

2-17-11

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

2-17-11

Date

APPROVED  
AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA