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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

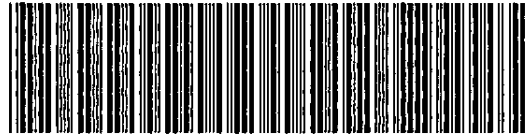
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Hawthorne 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: Candace A. Hawthorne, Esq.

Name (Printed or typed)

319 East Main Street

Address

Tavares, FL 32778

City, State & Zip

352-742-5200

Daytime Telephone number

ALawyerCH@aol.com

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

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

April 26, 2011

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

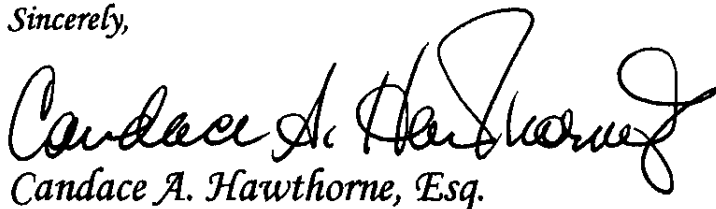
RE: Declination of Corporate Reinstatement

Dear Administrator:

This letter is to advise you that I do not wish to reinstate my corporation: The Hawthorne Law Firm, P.A. No.: P99000085241. I am releasing this name at this time.

Thank you for your assistance in this matter.

Sincerely,



Candace A. Hawthorne, Esq.

319 East Main Street

Tavares, Florida 32778

Phone: 352-742-5200

Fax: 352-742-5151

E-Mail: ALawyerCH@aol.com

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 APR 29 PM 3:50

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

Hawthorne Law Firm, P.A.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
319 East Main Street
Tavares, FL 32778

Mailing address, if different is:

P.O. Box 124
Mount Dora, FL 32756-0124

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide legal counseling and attorney services.

ARTICLE IV SHARES

The number of shares of stock is: 500 shares at \$1.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Candace A. Hawthorne, Esq., Pres.
Address: P.O. Box 124
Mount Dora, FL 32756-0124

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: Candace A. Hawthorne, Esq.
Address: 319 East Main Street
Tavares, FL 32778

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Candace A. Hawthorne, Esq.
Address: 319 East Main Street
Tavares, FL 32778

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

Candace A. Hawthorne Esq.
Required Signature/Registered Agent

4-26-2011
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.

Candace A. Hawthorne Esq.
Required Signature/Incorporator

4/26/2011
Date

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TALLAHASSEE, FLORIDA

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