

P11000058931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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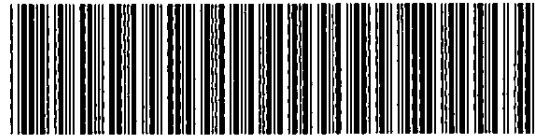
(Business Entity Name)

(Document Number)

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11 JUN 27 PM 12:15

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

for 6/27/11

COVER LETTER

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

11 JUN 27 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: DEBRA R MERRILL, 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: DEBRA R MERRILL

Name (Printed or typed)

5285 TOWER ROAD C-1

Address

TALLAHASSEE FL 32303

City, State & Zip

480-688-1078

Daytime Telephone number

DEBRARMERRILL@AOL.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

The name of the corporation shall be: DEBRA R MERRILL, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
5285 TOWER ROAD C-1
TALLAHASSEE FL 32303

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To provide public accounting services.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DEBRA R MERRILL, PRESIDENT	Name and Title: _____
Address: 5285 TOWER ROAD C-1	Address: _____
TALLAHASSEE FL 32303	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DEBRA R MERRILL
Address: 5285 TOWER ROAD C-1
TALLAHASSEE FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DEBRA R MERRILL
Address: 5285 TOWER ROAD C-1
TALLAHASSEE FL 32303

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

Debra R. Merrill

Required Signature/Registered Agent

6/27/11

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.

Debra R. Merrill

Required Signature/Incorporator

6/27/11

Date