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(Requestor's Name)

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(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

SC  
7-13-11

## COVER LETTER

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

SUBJECT: Kathleen M Flynn 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: Kathleen M Flynn PA

Name (Printed or typed)

4807 Sunset Court Unit 701

Address

Cape Coral FL 33904

City, State & Zip

239-699-2733

Daytime Telephone number

buggsz12@aol.com

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

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

SECRETARY OF STATE  
TALLAHASSEE, FL 32314

2011 JUL 11 PM 2:30

FILED

July 8, 2011

Department of State

Division of Corporations

P O Box 6327

Tallahassee, FL 32314

RE: Kathleen M Flynn PA

1402 NE Pine Island Lane

Cape Coral, FL 33909

Document Number : 06000019685

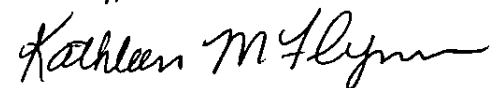
Dear Sirs:

Please be advised that the above document was dissolved for non- payment of annual report fees.

I do not wish to reinstate this Corporation and release the document number at this time.

Thank you for your assistance in this matter.

Sincerely,



Kathleen M Flynn

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SECRETARY OF STATE  
TALLAHASSEE, FL 32314

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

Kathleen M Flynn PA  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
4807 Sunset Court Unit 701  
Cape Coral, FL 33904

Mailing address, if different is:  
1217 Cape Coral Parkway E  
PMB 391  
Cape Coral, FL 33904

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Any and all business related to tax reporting and accounting

**ARTICLE IV SHARES**

The number of shares of stock is: 1000 shares @ \$1.00 par value per share

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

Name and Title: Kathleen M Flynn President  
Address: 4807 Sunset Court Unit 701  
Cape Coral, FL 33904

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: Kathleen M Flynn  
Address: 4807 Sunset Court Unit 701  
Cape Coral, FL 33904

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Kathleen M Flynn  
Address: 4807 Sunset Court Unit 701  
Cape Coral, FL 33904

*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*

Kathleen Flynn  
Required Signature/Registered Agent

7-8-2011  
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.*

Kathleen Flynn  
Required Signature/Incorporator

7-8-2011  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FL 32301