

P1100078370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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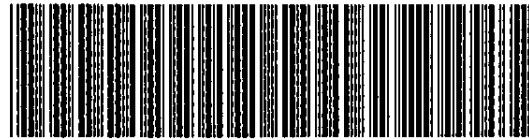
AUTHORIZATION BY PHONE TO

CORRECT *Purpose*

DATE \_\_\_\_\_

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08/22/11--01024--011 \*\*70.00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 SEP -2 PM 2:13

*PS 9/6/11*

## COVER LETTER

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

FEIN:  
74-3109241

SUBJECT: KAREN EVANS, P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Please also add: DBA Cruise Society

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: KAREN EVANS

Name (Printed or typed)

2333 Brickell Ave. Apt. 1005

Address

Miami, FL 33129

City, State & Zip

305-810-9415

Daytime Telephone number

KARENH.EVANS@gmail.com

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

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

**Karen Evans, P.A.**  
**2333 Brickell Avenue Suite-1005**  
**Miami, Florida 33129**  
**Office: 305.860.2878 Cell: 305.810.9415**  
**email: KarenH.Evans@gmail.com**

August 18, 2011

To: Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL. 32314


From: Karen Evans

Re: P06000043258 – Reinstate Corporation – Tax i.d. 74-3109241

Please note that I have no intention of filing P06000043258 to  
reinstate the existing corporate name and paying the \$900 to do this.

Please immediately release the name of : Karen Evans, P.A. and  
dba Cruise Society for immediate use.

Thank you.

  
Karen Evans, P.A.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
11 SEP -2 AM 11:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 23, 2011

KAREN EVANS  
2333 BRICKELL AVE APT 1005  
MIAMI, FL 33129

SUBJECT: KAREN EVANS, P.A.  
Ref. Number: W11000043842

We have received your document for KAREN EVANS, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Pamela Smith  
Regulatory Specialist II

Letter Number: 711A00019701

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

11 SEP -2 PM 2:13

**ARTICLE I NAME**

The name of the corporation shall be:

KAREN EVANS, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2333 Brickell Avenue  
Apt. 1005  
Miami, FL 33129

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Real Estate

**ARTICLE IV SHARES**

The number of shares of stock is:

50,000

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

Name and Title: Karen Evans, Pres. & Treasurer  
Address: 2333 Brickell Ave.  
#1005  
Miami, FL 33129

Name and Title:  
Address:

Name and Title: Anna Talbot, V.P.  
Address: 3811 LOCKROGE Drive  
Land O Lakes, FL 34638

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: Karen Evans  
Address: 2333 Brickell Ave.  
#1005  
Miami, FL 33129

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Karen Evans  
Address: 2333 Brickell Avenue  
#1005  
Miami, FL 33129

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

Karen Evans

Required Signature/Registered Agent

8-18-11

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.

Karen Evans

Required Signature/Incorporator

8-18-11

Date