

P11000082453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000211300180

08/26/11--01013--019 \*\*125.00

FILED

11 SEP 19 PM 12:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Purpose

MRS  
9/20

W11-44812

## COVER LETTER

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

SUBJECT: Law Office of Maria T. Palacios 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

→ Apply to already  
received funds

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Maria T. Palacios Esq.  
Name (Printed or typed)

8870 North Himes Ave, Number 634  
Address

Tampa, Florida 33614  
City, State & Zip

(716) 628-1394  
Daytime Telephone number

palacioslawoffice@gmail.com  
E-mail address: (to be used for future annual report notification)

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

**MARIA T. PALACIOS**

8870 North Himes Ave • Number 634 • Tampa, Florida 33614 • 716.628.1394 • palacioslawoffice@gmail.com

RECEIVED  
11 SEP 19 AM 10:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 13, 2011

Attention: Gina McLeod  
Regulatory Specialist II  
Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Law Office of Maria T. Palacios, PLLC  
Reference Number: W11000044812  
Law Office of Maria T. Palacios, P.A.

Dear Ms. McLeod:

I recently tried to file Articles of Organization for a Florida Limited Liability Company. In response, you sent me a letter requiring a brief description of the entity.

Since receiving this letter, I have decided to not go forward with filing articles for an LCC. Instead, I wish to file Articles of Incorporation to form a Professional Association.


Therefore, attached to this letter are my Articles of Incorporation in order to create a Professional Association. Also, attached for reference is your letter requesting a description of my first filing for an LLC.

Additionally, I wish to apply the funds already set forth and received by the Department of State to my filing for a Professional Association. Since I've already sent in \$125 and the filing fee for a Professional Association is \$78.75, I am requesting a refund in the amount of \$46.25.

Please contact me at any time if you require any additional information.

Thank you for assistance.

Sincerely,

  
Maria T. Palacios

**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: Law office of Maria T. Palacios, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

8870 North Times Ave  
Number 634  
Tampa, FL 33614

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of the corporation is to practice law and provide legal services to clients. This entity is being formed to advise individuals on their legal rights & responsibilities when assistance is sought.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: Maria T. Palacios, Esq.  
Address: President  
8870 North Times Ave, # 634  
Tampa, FL 33614

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: Maria T. Palacios, Esq.  
Address: 5816 Idle forest place  
Tampa, FL 33614

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Maria T. Palacios Esq.  
Address: 5816 Idle forest place  
Tampa, FL 33614

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

Maria T. Palacios  
Required Signature/Registered Agent

9/13/11  
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.

Maria T. Palacios  
Required Signature/Incorporator

9/13/11  
Date

**FILED**  
11 SEP 19 PM 12:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA