

P11000108463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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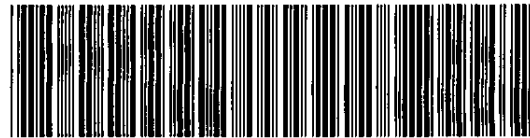
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2011 DEC 27 PM 2:52

12/28/11

## COVER LETTER

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

SUBJECT: Joni Willoughby, 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: Joni Willoughby  
Name (Printed or typed)

15880 San Carlos Blvd. #240  
Address

Fort Myers, FL 33908  
City, State & Zip

239-989-6545  
Daytime Telephone number

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

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

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Application # 2000100

# 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:

Joni Willoughby, P.A.

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## ARTICLE II PRINCIPAL OFFICE

Principal street address

15880 San Carlos Blvd. #240

Fort Myers, FL 33908

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Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sale real estate to potential buyers and to list real estate for the purpose of selling to a qualified buyer.

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joni Willoughby, President

Address: 15880 San Carlos Blvd. #240

Fort Myers, FL 33908

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: Joni Willoughby

Address: 15880 San Carlos Blvd. #240

Fort Myers, FL 33908

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joni Willoughby

Address: PO Box 07027

FT. Myers FL 33919

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

Joni Willoughby  
Required Signature/Registered Agent

11/22/11

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.

Joni Willoughby  
Required Signature/Incorporator

11/22/11

Date

Amplification # 2009120