

PI 2000007353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

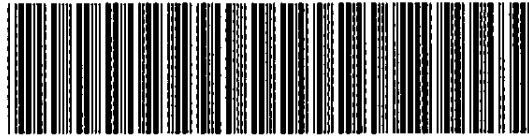
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/20/12--01018--018 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 20 AM 11:51

PS 2/23/12

COVER LETTER

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

SUBJECT: Christopher J. DeCosta, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Christopher J. DeCosta
Name (Printed or typed)

984 Sand Castle Road
Address

Sanibel, FL 33957
City, State & Zip

(617) 780-9576
Daytime Telephone number

cjdecosta@yahoo.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME Christopher J. DeCosta, PA
The name of the corporation shall be:

12 JAN 20 AM 11:51

ARTICLE II PRINCIPAL OFFICE

Principal street address
984 Sand Castle Rd.
Sanibel, FL 33957

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Practice of Law

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher J. DeCosta, President Name and Title: _____
Address: 984 Sand Castle Rd. Address: _____
Sanibel, FL 33957 _____

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:

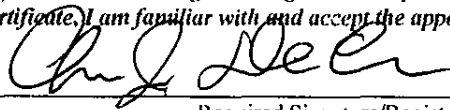
Name: Christopher J. DeCosta
Address: 984 Sand Castle Rd.
Sanibel, FL 33957

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Christopher J. DeCosta
Address: 984 Sand Castle Rd.
Sanibel, FL 33957

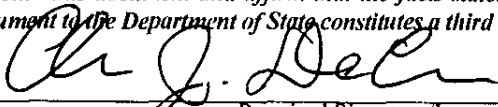
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent 1/15/12

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.



Required Signature/Incorporator 1/15/12

Date