

P12000015207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

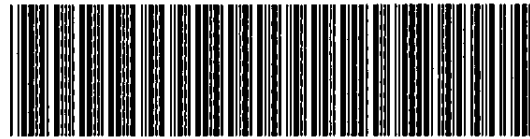
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/13/12--01025--007 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 FEB 13 AM 10:44

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J. Shivers FEB 14 2012

COVER LETTER

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

SUBJECT: David Marshall Brown, 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

<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: David Marshall Brown
Name (Printed or typed)

413 S.W. 5th Street
Address

Fort Lauderdale, Florida 33315
City, State & Zip

(954) 765-3166
Daytime Telephone number

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

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 TALLAHASSEE FLORIDA

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)

ARTICLE I NAME

The name of the corporation shall be: **David Marshall Brown, P.A.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
413 S.W. 5th Street
Fort Lauderdale, Florida 33315

Mailing address, if different is:
413 S.W. 5th Street
Fort Lauderdale, Florida 33315

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
This Corporation may engage in any activity or business permitted under the laws of the State of Florida for corporations, including the practice of law.

ARTICLE IV SHARES

The number of shares of stock is: Number of shares authorized: 1,000; Par Value per share: \$1.00; Class of Stock: Common

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: David Marshall Brown, President Name and Title: _____
Address: 413 S.W. 5th Street Address: _____
Fort Lauderdale, Florida 33315 _____

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: David Marshall Brown
Address: 413 S.W. 5th Street
Fort Lauderdale, Florida 33315

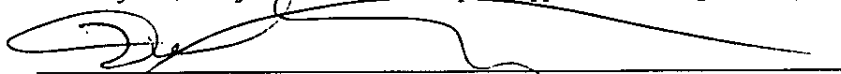
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: David Marshall Brown
Address: 413 S.W. 5th Street
Fort Lauderdale, Florida 33315

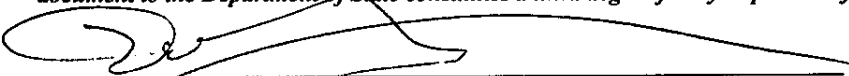
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TALLAHASSEE, FLORIDA

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

02/09/2012
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

02/09/2012
Date