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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

☐ \$78.75 Filing Fee
& Certified Copy
☒ \$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)

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

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TALLAHASSEE, FLORIDA

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

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:

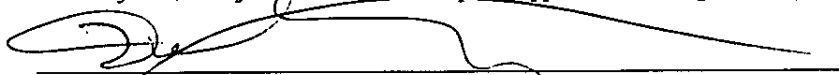
Name: David Marshall Brown
Address: 413 S.W. 5th Street
Fort Lauderdale, Florida 33315

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

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

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