

P12000015386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

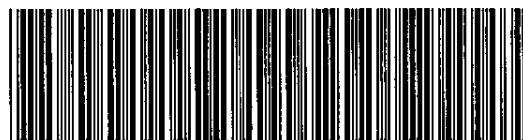
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02/06/12--01029--018 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 14 AM 10:30

2/15/12

COVER LETTER

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

SUBJECT: Marcos Gonzalez + Associates, 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: Marcos Gonzalez
Name (Printed or typed)

939 Belvedere Rd.
Address

West Palm Beach, FL 33405
City, State & Zip

561-965-6550
Daytime Telephone number

Cary@palmbeachinjurylawyers.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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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 14 AM 10:30



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 FEB 14 AM 10:30

February 7, 2012

MARCOS GONZALEZ
939 BELVEDERE ROAD
WEST PALM BEACH, FL 33405

SUBJECT: MARCOS GONZALEZ & ASSOCIATES, PA
Ref. Number: W12000007370

We have received your document for MARCOS GONZALEZ & ASSOCIATES, PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The specific business purpose of the professional association must be stated in the document.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 512A00005200

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

The name of the corporation shall be: Marcos Gonzalez & Associates, P.A.

12 FEB 14 AM 10:30

ARTICLE II PRINCIPAL OFFICE

Principal street address
939 Belvedere Road
West Palm Beach, FL 33405

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To perform and provide legal services.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Marcos R. Gonzalez -- CEO
Address: 939 Belvedere Road
West Palm Beach, FL 33405

Name and Title: Cary Gutierrez -- Bookkeeper
Address: 939 Belvedere Road
West Palm Beach, FL 33405

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:

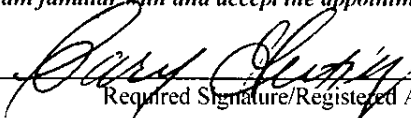
Name: Cary Gutierrez
Address: 939 Belvedere Road
West Palm Beach, FL 33405

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

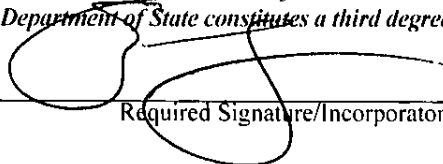
Name: Marcos R. Gonzalez
Address: 939 Belvedere Road
West Palm Beach, FL 33405

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

2/13/2012
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

2/13/2012
Date