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# **COVER LETTER**

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

-

# SUBJECT: Jack Pepper, 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 \$78.75   Filing Fee Filing Fee   & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED

FROM: Jack Pepper

Name (Printed or typed)

7189 Griffin Road

Address

Brooksville, Florida 34601 City, State & Zip

(352) 799-6842

Daytime Telephone number

jackandcindypepper@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)

#### ARTICLE I NAME

Jack Pepper, P.A. The name of the corporation shall be:

#### ARTICLE II PRINCIPAL OFFICE

Principal street address 7189 Griffin Road Brooksville, FL 34601

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The practice of law.

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Mailing address if different is, TABLALA DOUT TO TOP STORE

#### ARTICLE IV SHARES

The number of shares of stock is 2,000

#### **INITIAL OFFICERS AND/OR DIRECTORS** ARTICLE V

Name and Title Address:	: Jack Pepper, President 7189 Griffin Road Brooksville, FL 34601	Name and Title: Address:	
Name and Title Address:	e:		
Name and Title Address:	ə:	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:	Jack Pepper
Address:	7189 Griffin Road
	Brooksville, EL 34601

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Nar Ado

Jack Pepper
7189 Griffin Road
Brooksville, FL 34601

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

2/15/12

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

2/15/12

Date