

P12000017550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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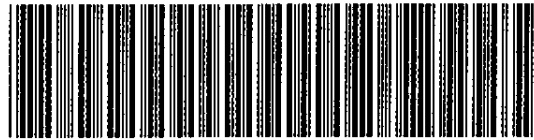
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 20 PM 12:56

JP 2/21/12

COVER LETTER

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

SUBJECT: JAMES CHIPMAN BLACK, 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

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: JAMES C. BLACK
Name (Printed or typed)

8500 SW 107 STREET
Address

MIAMI, FLORIDA 33156
City, State & Zip

305-606-6489
Daytime Telephone number

CHIP@CHIPBLACK.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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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:

JAMES CHIPMAN BLACK, PA

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ARTICLE II PRINCIPAL OFFICE

Principal street address

8500 SW 107 STREET

MIAMI, FLORIDA 33156

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE BROKERAGE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES C. BLACK

Address: 8500 SW 107 STREET

MIAMI, FLORIDA 33156

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: JAMES C. BLACK

Address: 8500 SW 107 STREET

MIAMI, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JAMES C. BLACK

Address: 8500 SW 107 STREET

MIAMI, FLORIDA 33156

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

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

Date