

P/2000027/75

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

CORRECTED ARTICLE IV
(STOCKS) PER TELEPHONE
CONVERSATION WITH
JULIE ABRAHAM DICK.

K 03/24/12

Office Use Only



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03/19/12--01029--015 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 MAR 19 PM 2:47

FILED

K 03/20/12

COVER LETTER

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

SUBJECT: Law Offices of Julie Abraham Dick, 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: Julie Abraham Dick, P.A.
Name (Printed or typed)

151 Crandon Blvd. #100
Address

Key Biscayne, FL 33149
City, State & Zip

312-399-4057
Daytime Telephone number

juliedick@gmail.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

The name of the corporation shall be: Law Offices of Julie Abraham Dick, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
151 Crandon Blvd. #100
Key Biscayne, FL 33149

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in the practice of law

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Julie Abraham Dick, President
Address: 151 Crandon Blvd. #100
Key Biscayne, FL 33149

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: Julie Abraham Dick
Address: 151 Crandon Blvd. #100
Key Biscayne, FL 33149

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Julie Abraham Dick
Address: 151 Crandon Blvd. #100
Key Biscayne, FL 33149

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

Julie Abraham Dick
Required Signature/Registered Agent

3/15/12
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.

Julie Abraham Dick
Required Signature/Incorporator

3/15/12
Date

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DEPT. OF STATE
TALLAHASSEE, FLORIDA