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COVER LETTER

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

SUBJECT: STACKNIK & AMES, 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: CRAIG L. AMES

Name (Printed or typed)

10151 DEERWOOD PARK BLVD, STE 200-250

Address

JACKSONVILLE, FL 32256-0589

City, State & Zip

(904) 374-2136

Daytime Telephone number

CRAIGLAMES@COMCAST.NET

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 18 AM 10:13

FILED

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

STACKNIK & AMES, P.A.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

10151 DEERWOOD PARK BLVD
SUITE 200-250
JACKSONVILLE, FL 32256-0589

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

LAW FIRM ORGANIZED AS A PROFESSIONAL ASSOCIATION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: WESLEY R. STACKNIK, PRINCIPAL
Address: 7985 113TH STREET NORTH
SUITE 350
SEMINOLE, FL 33772-4789

Name and Title: _____
Address: _____

Name and Title: CRAIG L. AMES, PRINCIPAL
Address: 10151 DEERWOOD PARK BLVD
SUITE 200-250
JACKSONVILLE, FL 32256-0589

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:

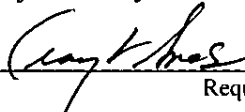
Name: CRAIG L. AMES
Address: 10151 DEERWOOD PARK BLVD, SUITE 200-250
JACKSONVILLE, FL 32256-0589

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CRAIG L. AMES
Address: 10151 DEERWOOD PARK BLVD, SUITE 200-250
JACKSONVILLE, FL 32256-0589

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

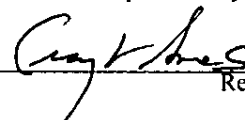


Required Signature/Registered Agent

MAY 15, 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

MAY 15, 2012

Date

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2012 MAY 18 AM 10:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA