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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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- 72635



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12 JUL -2 PM 3: 50
SECRETARY OF STATE
AND ANASSEE FLORING

MRS 73/12

COVER LETTER

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

SUBJECT: Jeffrey Borham, PA	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the art	icles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Jeffrey Borham	-
Name	e (Printed or typed)
35095 US 19 N. Suite 10	OO Address
Palm Harbor, FL 34684	State & Zip
727-510-0187 Daytime T	Telephone number
jeffborham@gmail.com	d for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



RECEIVED 12 JUL -2 ABIO: 45

STATE OF STATE

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 21, 2012

JEFFREY BORHAM 35095 US 19 B, SUITE 100 PALM HARBOR, FL 34684

SUBJECT: JEFFREY BORHAM, PA Ref. Number: W12000033635

We have received your document for JEFFREY BORHAM, 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 specific business purpose of the professional association must be stated in the document.

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) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section

Letter Number: 312A00017207

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I N. The name of the corpo	AME Jeffrey Borham, PA ration shall be:		
350	RINCIPAL OFFICE Principal <u>street</u> address 195 US 19 N. Suite 100 m. Harbor, Fl 34684		ailing address, if different is:
For any and all	h the corporation is organized is: FER(ESTRIC UNS.WLSS.		12 JUL -2 PL SECRETASSE
The number of shares			
Name and Title: Address:	IITIAL OFFICERS AND/OR DIRECTORS Jeffrey Borham, Officer 272 Millstone Dr. Palm Harbor, FL 34683	Name and Title: Address:	TATE ORIUM
Name and Title: Address:		Name and Title:Address:	
Name and Title: Address:		Name and Title: Address:	
	EGISTERED AGENT a street address (P.O. Box NOT acceptable) of Jeffrey Borham 272 Millstone Dr Palm Harbor, FL 34683		is:
	ICORPORATOR Solution of the Incorporator is: Jeffrey Borham 272 Millstone Dr. Palm Harbor, FL 34683		
	Required Signature/Registered Agent	stered agent and agi	
	nt and affirm that the facts stated herein are to rtment of State constitutes a third degree felony	true. I am aware th as provided for in s	
SAM I	Required Signature/Incorporator	y Borham	6/18/12 Date