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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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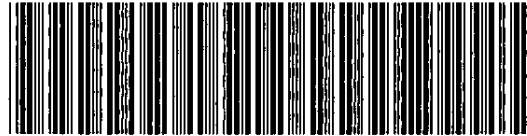
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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



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Special Instructions to Filing Officer:

*Cortney R. Elam, Esq.*  
**AUTHORIZATION BY PHONE TO**  
**CORRECT** *Article IV*  
**DATE** *7/17/12*  
**DOC. #** *MRD*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 JUL 16 PM 12:49

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*MRD*  
*7/17/12*

## COVER LETTER

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

SUBJECT: Cortney R. Elam Law, 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: Cortney R. Elam, Esq.

Name (Printed or typed)

P.O. Box 2509

Address

Orlando, FL 32802

City, State & Zip

(404) 210-7640

Daytime Telephone number

creamlaw@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** Cortney R. Elam Law, P.A.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2208 Hillcrest St.  
Orlando, FL 32803

Mailing address, if different is:  
P.O. Box 2509  
Orlando, FL 32802

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
A law firm.

**ARTICLE IV SHARES**

The number of shares of stock is: 10

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

Name and Title: Cortney R. Elam, Esq. President  
Address: P.O. Box 2509  
Orlando, FL 32802

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
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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: Cortney R. Elam  
Address: 2208 Hillcrest St  
Orlando, FL 32803

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Cortney R. Elam  
Address: 2208 Hillcrest St.  
Orlando, FL 32803

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

CRElam

Required Signature/Registered Agent

7/13/12

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.

CRElam

Required Signature/Incorporator

7/13/12

Date

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TALLAHASSEE, FLORIDA