

12000063305

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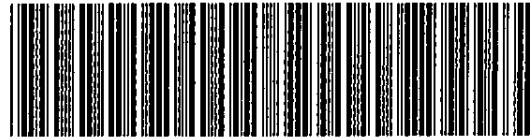
(Business Entity Name)

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TALLAHASSEE, FLORIDA

J. Shivers JUL 19 2012

W12-35455  
670



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 3, 2012

LISA M. GOMEZ-RIVERA  
5100 N OCEAN BLVD UNIT 1614  
LAUDERDALE BY THE SEA, FL 33308

SUBJECT: L.M. GOMEZ-RIVERA CONSULTING, P.A.  
Ref. Number: W12000035455

We have received your document for L.M. GOMEZ-RIVERA CONSULTING, P.A. 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.

Justin M Shivers  
Regulatory Specialist II  
New Filing Section

Letter Number: 212A00017986

## COVER LETTER

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

SUBJECT: L.M. Gomez-Rivera Consulting, 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: Lisa M. Gomez-Rivera

Name (Printed or typed)

5100 North Ocean Blvd, Unit 1614

Address

Lauderdale By The Sea, FL 33308

City, State & Zip

954-892-2773

Daytime Telephone number

lisa3gomez@comcast.net

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** L.M. Gomez-Rivera Consulting, P.A.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
5100 North Ocean Blvd. Unit 1614  
Lauderdale By The Sea, FL 33308

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

All lawful litigation support and business  
advisory consulting services

**ARTICLE IV SHARES**

The number of shares of stock is: 10

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

Name and Title: Lisa M. Gomez-Rivera, P  
Address: 5100 North Ocean Blvd. Unit 1614  
Lauderdale By The Sea, FL 33308

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: Lisa M. Gomez-Rivera  
Address: 5100 North Ocean Blvd. Unit 1614  
Lauderdale By The Sea, FL 33308

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lisa M. Gomez-Rivera  
Address: 5100 North Ocean Blvd. Unit 1614  
Lauderdale By The Sea, FL 33308

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

6/29/2012  
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

6/29/2012  
Date

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2012 JUL 18 PM 1:20  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE