

Florida Department of State
Division of Corporations
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To:

Division of Corporations
 Fax Number : (850) 617-6381

From:

Account Name : M. BURR KEIM COMPANY
 Account Number : I19990000242
 Phone : (215) 563-8113
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FLORIDA PROFIT/NON PROFIT CORPORATION
THE EXPUNGEMENT CLINIC, P.C.

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12 JUL 31 2012

ARTICLES OF INCORPORATION

OF

THE EXPUNGEMENT CLINIC, P.A.

The undersigned, for the purpose of forming a corporation pursuant to the provisions of the Florida General Corporations Act, Chapter 607 and The Florida Professional Service Corporations Act, Chapter 621 hereby certifies that:

FILED
12 JUL 30 AM 9:30
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1. The name of the corporation is:

THE EXPUNGEMENT CLINIC, P.A.

2. The purpose or purposes for which the corporation is organized are to engage in the practice of law; to invest its funds in real estate, mortgages, stocks, bonds, or any other type of investment and to own real or personal property necessary for the rendering of its professional services.

3. The principal place of business and mailing address of this corporation shall be 1875 NW Corporate Boulevard, Suite 290, Boca Raton, FL 33431.

4. The number of shares of stock which this corporation is authorized to have outstanding at any one time is:

One Hundred Shares (100) Shares Par Value \$1.00 Per Share

5. The name and address of the initial registered agent:

Michelle Merson 1875 NW Corporate Boulevard
Suite 290
Boca Raton, FL 33431

6. The name and address of the incorporator is:

Michelle Merson 1875 NW Corporate Boulevard
Suite 290
Boca Raton, FL 33431

The undersigned has executed these Articles of Incorporation this 26th day of July, 2012.


Michelle Merson, Incorporator

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

THE EXPUNGEMENT CLINIC, P.A.

2. The name and address of the registered agent and office is:

Michelle Merson

1875 NW Corporate Boulevard
Suite 290
Boca Raton, FL 33431

Signature: 

Michelle Merson

Title: Incorporator

Date: July 26, 2012

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature: 

Michelle Merson

Date: July 26, 2012

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12 JUL 30 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07/30/2012 10:25 FAX 215 977 9386
850-617-6381

M BURR KEIM CO
7/30/2012 8:48:45 AM PAGE 1/001 fax server 004



July 30, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

M. BURR KEIM COMPANY

SUBJECT: THE EXPUNGEMENT CLINIC, P.C.
REF: W12000039800

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The only acceptable words for designation as a professional association are PROFESSIONAL ASSOCIATION, P.A., and CHARTERED.

If you have any further questions concerning your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

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