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SECRETARY OF STATE BIVISION OF CORPORATIONS

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## **COVER LETTER**

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

SUBJECT: Scott R. Shapiro, P.A.		
(PROPOSED CORPORAT	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	les of incorporation an	d a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
	ADDITIONAL CO	OPY REQUIRED
FROM: Scott R. Shapiro Name	(Printed or typed)	
11431 Lakeview Drive		
Coral Springs, FL 33071	ddress	
(954) 675-7189  Daytime Te	lephone number	
srshapiro@hotmail.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

8/13/12

Date

ARTICLE I	LEI NAME Scott R. Shapiro, P.A.		STATISTICAL C	MINN OF COVERNMEN	
The name of the corp	poration shall be:		12 AUG 15	AM 10: 52	
ARTICLE II	PRINCIPAL OFFICE				
	Principal street address	Mai	ling address, if different is:		
	431 Lakeview Drive		·····		
.00	oral Springs, FL 33071				
ARTICLE III P	PURPOSE	-			
The purpose for wh	ich the corporation is organized is:				
The practice o	f law.				
ARTICLE IV S The number of share					
	INITIAL OFFICERS AND/OR DIRECTOR				
Name and Titl	e:Scott R. Shapiro / President	_ Name and Title:			
Address:		Address:			
		_		<del></del>	
		_			
Name and Titl	e:	Name and Title:			
Address:		Name and Title	<del></del> .		
Addiess.					
		<del></del>	····		
Name and Titl	e:	Name and Title:			
Address:		Address:			
	REGISTERED AGENT	felia manistamad anaut in			
Name:	da street address (P.O. Box NOT acceptable) o Glazer & Associates, P.A.	of the registered agent is			
Address:	3113 Stirling Road, Suite 201	_			
71001033.	Fort Lauderdale, FL 33312				
	•	_			
	NCORPORATOR				
	ess of the Incorporator is:				
Name:	Scott R Shapiro	<del>_</del>			
Address:	11431 Lakeview Drive	_			
	Coral Springs, FL 33071	_			
Haying-been named this certificate, I am	as registered agent to accept service of proces familiar with and accept the appointment as reg	ss for the above stated gistered agent and agre	corporation at the place d e to act in this capacity	esignated in	
	I for det		8/13/12		
	Required Signature/Registered Agent	<del> </del>	Date		
	. Tedanica digitatale tregioseiea rigetti		Duic		
	ent and affirm that the facts stated herein are artment of State constitutes a third degree felon			bmitted in a	

Required Signature/Incorporator