

P12000102414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

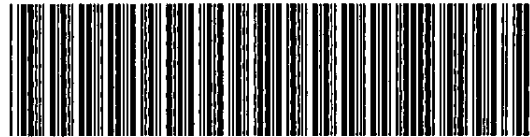
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400242279404

12/17/12--01046--010 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC 17 AM 10:38

12/18/12

COVER LETTER

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

SUBJECT: Law Offices of E.F. Robinson, 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: Veronica Robinson

Name (Printed or typed)

7101 W. Commercial Blvd., Suite 4A

Address

Fort Lauderdale, FL 33319

City, State & Zip

(954)840-53-01

Daytime Telephone number

vrobinson@erobinsonlaw.com

E-mail address: (to be used for future annual report notification)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 DEC 17 AM 10:38

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

The name of the corporation shall be: **Law Offices of E.F. Robinson, P.A.**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE II PRINCIPAL OFFICE

Principal street address
7101 W. Commercial Blvd., Suite 4A
Fort Lauderdale, FL 33319

12 DEC 17 AM 10:38
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **provide legal services.**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Veronica Robinson, President
Address: 7101 W. Commercial Blvd., Suite 4A
Fort Lauderdale, FL 33319

Name and Title: Emmett F. Robinson, Sr., Director
Address: 1712 Financial Loop
Lake Ridge, VA 22192

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: Veronica Robinson
Address: 7101 W. Commercial Blvd., Suite 4A
Fort Lauderdale, FL 33319

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Veronica Robinson
Address: 7101 W. Commercial Blvd., Suite 4A
Fort Lauderdale, FL 33319

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

12/12/2012

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

12/12/2012

Date