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(City/State/Zip/Phone #)

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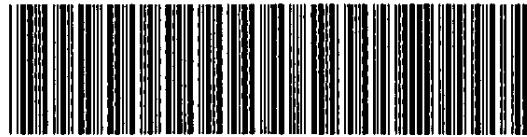
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: RIGGINS PISANI, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: LINDA G. PISANI, ESQ.
Name (Printed or typed)
421 SOUTH PINE AVENUE
Address
OCALA, FL 34471
City, State & Zip
352.433-2400
Daytime Telephone number
LPISANI@RIGGINSLAWFIRM.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

The name of the corporation shall be: **RIGGINS PISANI, P.A.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
421 SOUTH PINE AVENUE
OCALA, FLORIDA 34471

Mailing address, if different is:
PO BOX 830222
OCALA, FLORIDA 34483

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **THE PRACTICE OF LAW.**

Start date/Effective date: January 3, 2013

ARTICLE IV SHARES

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIALLE RIGGINS, ESQ. -- PRES./TREASURER
Address: 421 SOUTH PINE AVENUE
OCALA, FL 34471

Name and Title: LINDA G. PISANI, ESQ. -- V. PRES/SECRETARY
Address: 421 SOUTH PINE AVENUE
OCALA, FL 34471

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: DANIALLE RIGGINS, ESQ.
Address: 421 SOUTH PINE AVENUE
OCALA, FLORIDA 34471

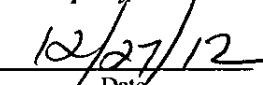
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LINDA G. PISANI, ESQ.
Address: 421 SOUTH PINE AVENUE
OCALA, FLORIDA 34471

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


Date 12/27/12

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


Date 12/27/12

SECRETARY OF STATE
PAUL HANSEN, FLORIDA

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