(Re	equestor's Name)	
(Ác	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only

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COVER LETTER

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

SUBJECT: KON	iaid H. Kauπman		
	(PROPOSED CORPORA	TE NAME – MUST INCL	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
_			
FROM: R	onald H. Kauffm	an	
. 100111.		e (Printed or typed)	
10	00 SE Second St	treet Suite 27	00

NOTE: Please provide the original and one copy of the articles.

Address

City, State & Zip

Daytime Telephone number

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

Miami FL 33131

305 374-0937

ron@rhkauffman.com



FLORIDA DEPARTMENT OF STATEDIA AN -4 PM 12: 5
Division of Corporations

SECRETARY OF STATE TALLAHASSEE FLORIDA

December 19, 2012

RONALD H. KAUFFMAN 100 SE SECOND STREET SUITE 2700 MIAMI, FL 33131

SUBJECT: RONALD H. KAUFFMAN, P.A.

Ref. Number: W12000062746

We have received your document for RONALD H. KAUFFMAN, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 312A00029990

Effective dut 3

(RX)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

he name of the c	NAME orporation shall be: Ronald H. K	r 607 and/or Chapter 621, F.S. (Profit) SECTION OF S (auffman, P.A.	k AF
		13 JAN -4 PM 4	. 5
RTICLE II	PRINCIPAL OFFICE Principal street address	Mailing address, if different is:	4° J
	100 SE Second Street Suite 2700	watting address, it different is:	
	Miami FL 33131		_
			_
RTICLE III	DUDDOCF		
	which the corporation is organized is:		
rofessional s	service to be rendered is the prac	ctice of law.	
RTICLE IV	SHARES ares of stock is: 100 shares of commo	on stock at \$1 par value	
Nome and T	INITIAL OFFICERS AND/OR DIR itle: Ronald H. Kauffman President and Director		
Name and 1 Address:	100 SE Second Street #2700	Name and Title: Address:	
Address.	Miami FL 33131		_
			_
Nama and T	'itle:	Name and Title:	
Address:	me:		
Addiess.			
			<u> </u>
N	****	Manager d'Orden	
		Name and Title:	
Address:			
			-
RTICLE VI	REGISTERED AGENT		
e <u>name and Fid</u> Name:	Drida street address (P.O. Box NOT acce	eptable) of the registered agent is:	
Address:	100 SE Second Street #1120		
Address.	Miami FL 33131		
			
	INCORPORATOR		
	dress of the Incorporator is:		
e <u>name and ad</u>	Ronald H. Kauffman 100 SE Second Street #2700		
e <u>name and ad</u> Name:			
e <u>name and ad</u>	Miami FL 33131		
ne <u>name and ad</u> Name:	Miami FL 33131		l in
ne name and ad Name: Address:	ned as registered agent to accept service o	of process for the above stated corporation at the place designated	
ne name and ad Name: Address:	ned as registered agent to accept service o	of process for the above stated corporation at the place designated nent as registered agent and agree to act in this capacity	
e name and ad Name: Address:	ned as registered agent to accept service o		
ne name and ad Name: Address:	ned as registered agent to accept service of the appointment of the ap	nent as registered agent and agree to act in this capacity	_
ne name and ad Name: Address:	ned as registered agent to accept service o	nent as registered agent and agree to act in this capacity	-
ne name and ad Name: Address: aving been name is certificate, I a	ned as registered agent to accept service of the appointment of the ap	Agent Date	- -
ne name and ad Name: Address: aving been name is certificate, I a	ned as registered agent to accept service of the appointment of the acceptance of the appointment of the acceptance of the acceptanc	Agent are true. I am aware that the false information submitted in	 n a
ne name and ad Name: Address: aving been name is certificate, I a	ned as registered agent to accept service of the appointment of the acceptance of the appointment of the acceptance of the acceptanc	Agent Date	– n a
ne name and ad Name: Address: aving been name is certificate, I a	ned as registered agent to accept service of the appointment of the acceptance of the appointment of the acceptance of the acceptanc	Agent Date The provided for in s.817.155, F.S.	– n a
ne name and ad Name: Address: aving been name is certificate, I a	ned as registered agent to accept service of the appointment of the acceptance of the appointment of the acceptance of the acceptanc	Agent Date Agent registered agent and agree to act in this capacity - 3 / 5 Date Date	– n a