

Florida Department of State
Division of Corporations
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Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
BIANCA LUPOVICI DIENER, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	04
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J. Shivers FEB 06 2013

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Corporate Filing Menu

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COVER LETTER

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

SUBJECT: Bianca Lupovici Diener, 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: Bianca Lupovici Diener, Esq.

Name (Printed or typed)

5400 South University Drive, Suite 505

Address

Plantation, Florida 33328

City, State & Zip

954-463-8100

Daytime Telephone number

bdiener@mineolaw.com

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

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

H13000027726

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: Bianca Lupovici Diener, P.A.

ARTICLE II PRINCIPAL OFFICE
Principal street address: 5400 South University Drive
Suite 505
Davie, Florida 33328
Mailing address, if different is: Same

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: the practice of law.

ARTICLE IV SHARES
The number of shares of stock is: one thousand (1,000)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Bianca Lupovici Diener, Esq., President</u>	Name and Title:	_____
Address:	<u>5400 South University Drive</u> <u>Suite 505</u> <u>Davie, Florida 33328</u>	Address:	_____
Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Bianca Lupovici Diener, Esq.
Address: 5400 South University Drive, Suite 505
Davie, Florida 33328

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Bianca Lupovici Diener
Address: 5400 South University Drive, Suite 505
Davie, Florida 33328

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

B. Diener

Required Signature/Registered Agent

02/04/2013
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 2.817.155, F.S.

B. Diener

Required Signature/Incorporator

02/04/2013
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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