

P13000025911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

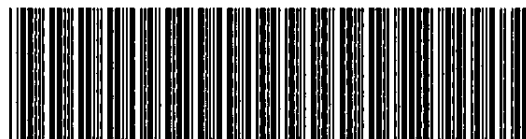
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Christina Vorce DAVE
AUTHORIZATION BY PHONE TO
CORRECT remove INC from corporate
DATE 3/20/13 Name
DOC. EXAM MRD

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13 MAR 19 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
3/20/13

114128

COVER LETTER

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

SUBJECT: Christina M. Vorce, CPA, 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: Christina M. Vorce
Name (Printed or typed)

1390 Willow Oak Court
Address

Vero Beach, FL 32966
City, State & Zip

772-766-9036
Daytime Telephone number

cmvorce@comcast.net
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: Christina M. Vorce, CPA, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1390 Willow Oak Court
Vero Beach, FL 32966

Mailing address, if different from

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Certified Public Accounting Services

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christina M. Vorce Name and Title: _____

Address: 1390 Willow Oak Court Address: _____
Vero Beach, FL 32966

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(conti.)

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Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name:

Christina M. Vorce

Address:

1390 Willow Oak Court

Vero Beach, FL 32966

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name:

Christina M. Vorce

Address:

1390 Willow Oak Court

Vero Beach, FL 32966

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

Christina M. Vorce

Required Signature/Registered Agent

3/14/13

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.

Christina M. Vorce

Required Signature/Incorporator

3/14/13

Date