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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

13 MAR 21 PM 12:53

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J. Shivers MAR 22 2013

13-9493  
6/11/13  
6/11/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 15, 2013

BRIAN A KIRLEW  
2945 NE 185TH ST #1403  
AVENTURA, FL 33180

SUBJECT: KIRLEW LAW FIRM P.A.  
Ref. Number: W13000009493

We have received your document for KIRLEW LAW FIRM P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Justin M Shivers  
Regulatory Specialist II  
New Filing Section

Letter Number: 213A00003791

## COVER LETTER

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

SUBJECT: **Kirlew Law Firm 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: **Brian A. Kirlew**

Name (Printed or typed)

**2945 NE 185th St. # 1403**

Address

**Aventura, FL 33180**

City, State & Zip

**305-209-8010**

Daytime Telephone number

**bkirlewesq@gmail.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: Kirlew Law Firm P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2550 NW 72nd Ave

Suite 319

Miami, FL 33122

Mailing address, if different is:

2945 NE 185th St.

#1403

Aventura, FL 33180

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: full service law firm

**ARTICLE IV SHARES 100**

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Brian Kirlew, President & CEO

Address 2945 NE 185th St.

#1403

Aventura, FL 33180

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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(conti.)

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: Brian A. Kirlew  
Address: 2945 NE 185th St. #1403  
Aventura, FL 33180

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Brian A. Kirlew  
Address: 2945 NE 185th St. #1403  
Aventura, FL 33180

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TALLAHASSEE, FLORIDA

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*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*

Brian Kirlew  
Required Signature/Registered Agent

3/10/13  
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.*

Brian Kirlew  
Required Signature/Incorporator

3/10/13  
Date