

PI3000035129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

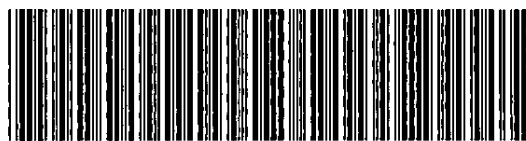
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100246843091

04/17/13--01024--007 **78.75

FILED
13 APR 17 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MD 4/18

COVER LETTER

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

SUBJECT: Hembree 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 ☒ \$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: Pamela Elliott Hembree

Name (Printed or typed)

6601 Renaldo Way S.

Address

St. Petersburg, FL 33707

City, State & Zip

727-504-4332

Daytime Telephone number

pamela.hembree@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: Hembree Law Firm, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6601 Renaldo Way S.
St. Petersburg, FL 33707

Mailing address, if different is:

FILED
13 APR 17 PM 12:48
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

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

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Pamela Elliott Hembree, Pres.

Name and Title: _____

Address 6601 Renaldo Way S.

Address: _____

St. Petersburg, FL 33707

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(conti.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
13 APR 17 PM 12:48
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: Pamela Elliott Hembree, Esq.

Address: 6601 Renaldo Way S.

St. Petersburg, FL 33707

ARTICLE VII INCORPORATOR

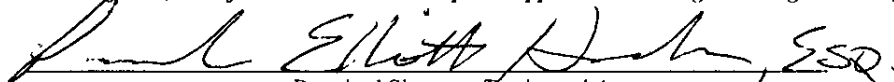
The **name and address** of the Incorporator is:

Name: Pamela Elliott Hembree, Esq.

Address: 6601 Renaldo Way S.

St. Petersburg, FL 33707

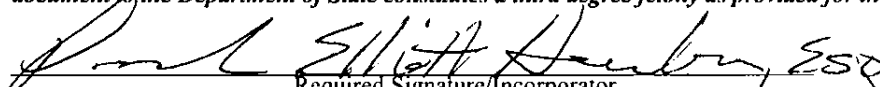
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

April 15, 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 s.817.155, F.S.


Required Signature/Incorporator

April 15, 2013

Date