P13000046046

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May 14, 2013

SUSAN SHUBERT 1821 TARPON BAY DR S NAPLES, FL 34119

SUBJECT: SHUBERT CONSULTANTS P.A.

Ref. Number: W13000028190

We have received your document for SHUBERT CONSULTANTS 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 specific business purpose of the professional association must be stated in the document.

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.

Letter Number: 713A00011956

Justin M Shivers Regulatory Specialist II New Filing Section

www.sunbiz.org

COVER LETTER

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

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(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 □ \$78.75 □ \$87.50 Filing Fee Filing Fee & Certificate of Status ■ Certified Copy	SUBJECT: S	hubert Consultants	P.A.			
Filing Fee Filing Fee & Certificate of Status System of Status FROM: Susan Shubert Name (Printed or typed) 1821 Tarpon Bay Drive South Address Naples, Florida 34119 City, State & Zip 239-597-0570 Daytime Telephone number Sshubert1@comcast.net	SCHOLET.			UDE SUFFIX)		
Filing Fee & Certificate of Status Filing Fee & Certified Copy & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Susan Shubert Name (Printed or typed) 1821 Tarpon Bay Drive South Address Naples, Florida 34119 City, State & Zip Daytime Telephone number sshubert1@comcast.net	Enclosed are an	original and one (1) copy of the arti	icles of incorporation and	d a check for:	_	
FROM: Susan Shubert Name (Printed or typed) 1821 Tarpon Bay Drive South Address Naples, Florida 34119 City, State & Zip 239-597-0570 Daytime Telephone number sshubert1@comcast.net	•	ee Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate o Status		
Name (Printed or typed) 1821 Tarpon Bay Drive South Address Naples, Florida 34119 City, State & Zip Daytime Telephone number sshubert1@comcast.net		•	ADDITIONAL CC	JPY REQUIRED		
Naples, Florida 34119 City, State & Zip Daytime Telephone number sshubert1@comcast.net	FROM		(Printed or typed)			
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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)

ICLE I NAM ame of the corporal ICLE II PRI	NCIPAL OFFICE			_
21 Tornon F	Principal street address	Maili	ing address, if differ	ent is:
	Bay Drive South			
ples Florida	34119			
ICLE III PUR urpose for which t	POSE he corporation is organized is:	any and all lawful	business in the s	state of Florida
				V1
	Little Control of the			
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ICLE IV SHA	ures 100		,	· · ·
ICLE IV SHA umber of shares of	IRES 100			·
umber of shares of	stock is: 100	•		· · · · · · · · · · · · · · · · · · ·
umber of shares of	stock is:	•	,	
umber of shares of	stock is: 100	Name and Title:	,	
umber of shares of ICLE V INIT Name and Title	rial officers and/or director ::Susan Shubert, President	Name and Title:		SEC.
umber of shares of ICLE V INIT Name and Title	rial officers and/or director Susan Shubert, President 1821 Tarpon Bay Drive South	Name and Title:		SE SE MAN
umber of shares of ICLE V INIT Name and Title	rial officers and/or director Susan Shubert, President 1821 Tarpon Bay Drive South	Name and Title:		TAIL OF THE STATE
umber of shares of ICLE V INIT Name and Title Address	rial officers and/or director Susan Shubert, President 1821 Tarpon Bay Drive South	Name and Title: Address:		ALL ALL SEC. OF
umber of shares of ICLE V INIT Name and Title Address	Stock is: 100 FIAL OFFICERS AND/OR DIRECTOR Susan Shubert, President 1821 Tarpon Bay Drive South Naples Florida 34119	Name and Title: Address: Name and Title:		SEGRECIES OF STA
ICLE V INIT Name and Title Address	Susan Shubert, President 1821 Tarpon Bay Drive South Naples Florida 34119	Name and Title: Address: Name and Title: Address:		SECTION OF THE PROPERTY OF
ICLE V INIT Name and Title Address	Susan Shubert, President 1821 Tarpon Bay Drive South Naples Florida 34119	Name and Title: Address: Name and Title: Address:		SECTION OF AN IO: 52
ICLE V INIT Name and Title Address	Susan Shubert, President 1821 Tarpon Bay Drive South Naples Florida 34119	Name and Title: Address: Name and Title: Address:		SECTION OF AN IO: 52
umber of shares of ICLE V INIT Name and Title Address Name and Title Address	Susan Shubert, President 1821 Tarpon Bay Drive South Naples Florida 34119	Name and Title: Address: Name and Title: Address:		SEUSSALUSE OF STATE

Name and	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and FI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) of Susan Shubert	the registered agent is:
Name:		
Address:	1821 Tarpon Bay Drive South Naples Florida 34119	
ARTICLE VII	INCORPORATOR	AN A
The name and ad	Idress of the Incorporator is:	
Name: Address:	Susan Shubert 1821 Tarpon Bay Drive South	# 를 변 등 경 58 급
	Naples Florida 34119	: 52 RIDA
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity
Zue	San Thorbert	5-21-2013
7	Required Signature/Registered Agent	Date
I submit this doc	ument and affirm that the facts stated herein are a Department of State constitutes a third degree felon	true. I am aware that the false information submitted in a
$ \rightarrow $	en Shubert	5-21-2013 Date
	Required Signature/Incorporator	Date