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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 752140 7950667

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : August 5, 2013

ORDER TIME : 12:43 PM

ORDER NO. : 752140-001

CUSTOMER NO: 7950667

Please Expedite!

DOMESTIC FILING

NAME: DEBORAH K. SCIDA, P.A.

EFFECTIVE DATE:

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP
☐ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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: DEBORAH K. SCIDA, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4740 NW 28th Way

Boca Raton, FL 33434

Mailing address, if different is:

4740 NW 28th Way

Boca Raton, FL 33434

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Services

ARTICLE IV SHARES

The number of shares of stock is: 1500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deborah K. Scida, Director

Address 4740 NW 28th Way

Boca Raton, FL 33434

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

(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: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

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

Name: Corporation Service Company
Address: 2711 Centerville Road, Suite 400
Wilmington, DE 19808

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
Corporation Service Company

By: Ann R. Shilling
Required Signature/Registered Agent

08/16/2013
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.

By: Ann R. Shilling
Required Signature/Incorporator
Title: Ann R. Shilling, Assistant Secretary

08/16/2013
Date

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