

P13000080255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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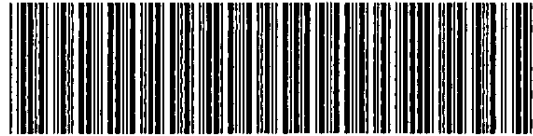
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/12/13--01020--008 **70.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 SEP 27 PM 2:00

20134 P 9/30/13



RECEIVED
27 PM 2:13
CLERK OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 17, 2013

MATTHEW BENZION
545 SE 12TH ST #205
DANIA, FL 33004

SUBJECT: MATT BENZION, P.A.
Ref. Number: W13000051534

We have received your document for MATT BENZION, 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 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 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.

Pamela Smith
Regulatory Specialist II

Letter Number: 013A00021810

COVER LETTER

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

SUBJECT: **Matt Benzion, 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: **Matthew Benzion**

Name (Printed or typed)

545 SE 12th Street, #205

Address

Dania, FL. 33004

City, State & Zip

561-306-5949

Daytime Telephone number

m_benzion@yahoo.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: Matt Benzion, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

13 SEP 27 PM 2:00

Mailing address, if different is:

4171 West Hillsboro Blvd.

Suite 9

Coconut Creek, FL. 33073

ARTICLE III PURPOSE

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

ARTICLE IV SHARES 10

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Matthew Benzion, President

Name and Title: _____

Address 545 SE 12th Street, #205

Address: _____

Dania, FL. 33004

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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: Matthew Benzion
Address: 4171 West Hillsboro Blvd.
Coconut Creek, FL. 33073

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Matthew Benzion
Address: 545 SE 12th Street, #205
Dania, FL. 33004

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

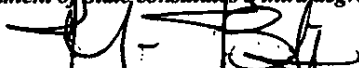


Required Signature/Registered Agent

9/24/13

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.



Required Signature/Incorporator

9/24/13

Date