

P130000085429

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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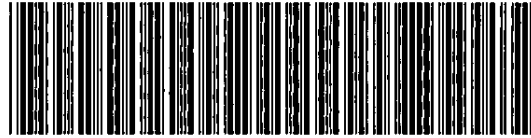
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
2013 OCT 17 PM 1:38

1/4

COVER LETTER

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

SUBJECT: _____

KELLY LAW, 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: _____

KEVIN KELLY

Name (Printed or typed)

301 E. PINE ST. SUITE 1400

Address

ORLANDO, FL 32806

City, State & Zip

407-843-8880

Daytime Telephone number

BOOLAVOORIS1@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)

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ARTICLE I NAME

The name of the corporation shall be:

KELLY LAW, P.A.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

KELLY LAW, P.A.
17 N. SUMMERLIN AVE, SUITE 200
ORLANDO, FL 32801

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SPECIFIC PURPOSE IS TO
PRACTICE LAW.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

KEVIN KELLY, DIR/CEO

Name and Title:

Address

17 N. SUMMERLIN AVE.
SUITE 200
ORLANDO, FL 32801

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(cont.)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Name and Title: _____ Name and Title: 2013 OCT 17 PM 1:38
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Name: KEVIN P. KELLY
Address: 17 N. SUMMERLIN AVE, SUITE 200
ORLANDO, FL 32801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KEVIN P. KELLY
Address: 17 N. SUMMERLIN AVE., SUITE 200
ORLANDO, FL 32801

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

10/14/13

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

10/14/13

Date