

P/3000092835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

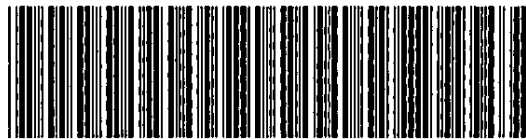
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400252750964

10/15/13--01008--015 **78.75

FILED
13 NOV 14 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W13-57766

K 11/15/13



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2013

WILLIAM LICHTENSTEIN
986 CRESTVIEW CIRCLE
WESTON, FL 33327

SUBJECT: WILLIAM LICHTENSTEIN P.A.
Ref. Number: W13000057766

RECEIVED
13 NOV 14 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for WILLIAM LICHTENSTEIN P.A. and your check(s) totaling \$78.75. 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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 013A00024319

COVER LETTER

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

SUBJECT: William Lichtenstein, 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: William Lichtenstein

Name (Printed or typed)

986 Crestview Circle

Address

Weston, FL 33327

City, State & Zip

954.540.9057

Daytime Telephone number

William.Lichtenstein@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: William Lichtenstein P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

986 Crestview Circle

Weston, FL 33327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Perform real estate services and any other legal purpose.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Lichtenstein, President

Name and Title: _____

Address 986 Crestview Circle

Address: _____

Weston, FL 33327

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
18 NOV 14 AM 10:02
SECRETARY OF STATE
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: InCorp Services, Inc.
Address: 17888 67th Court North
Loxahatchee, FL 33470

13 NOV 14 AM 10:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Lichtenstein
Address: 986 Crestview Circle
Weston, FL 33327

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

Theresa D. White Heather Neer for Incorp Services, Inc.
Required Signature/Registered Agent

11/11/13
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.

William Lichtenstein
Required Signature/Incorporator

10/21/13
Date