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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

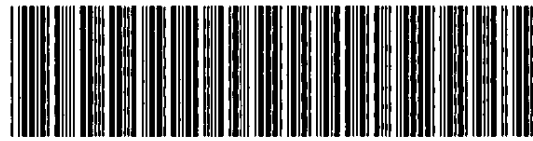
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 NOV 19 AM 10: 01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R 11/26/13

COVER LETTER

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

SUBJECT: SANDRA L SIMS, PA
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Sandra L Sims
Name (Printed or typed)
337 Vintage Bay Dr.#11
Address
Marco Island FL. 34145
City, State & Zip
239-393-1350
Daytime Telephone number
marcosandi@comcast.net
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

**HERBERT J. BUCK
ACCOUNTANTS, INC.**

**ACCOUNTANTS / TAX SPECIALISTS
5405 JAEGER ROAD
NAPLES, FLORIDA 34109**

**MEMBER OF NATIONAL SOCIETY
OF TAX PROFESSIONALS**

**(239) 514-4244
Fax: 514-4243**

**PERSONALIZED & PROFESSIONAL
TAX & ACCOUNTING SERVICES**

November 13, 2013

Florida Division of Corporations
PO BOX 6327
TALLAHASSEE, FL 32314

Re: Sandra L Sims PA
EIN# 45-3733946

13 NOV 19 AM 10: 01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To Whom It May Concern:

I will not revoke the dissolution of Sandra L Sims Pa. and release the name to be filed by another entity.

If you should need any additional information please do not hesitate to contact me at 239-393-1350.

Sincerely,


Sandra L Sims

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: Sandra L Sims, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

337 Vintage Bay Dr

Marco Island FL 34145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate sales.

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sandra L Sims Name and Title: _____

Address: President Address: _____

337 Vintage Bay Dr

Marco Island FL 34145

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

RECORDS SECTION
TALLAHASSEE, FLORIDA
NOV 19 AM 10:01

(conti.)

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: Sandra L Sims
 Address: 337 Vintage Bay dr
Marco Island FL 34145

RECEIVED
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 DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Sandra L Sims
 Address: 337 Vintage Bay Dr
Marco Island FL 34145

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,

Sandra L Sims

Required Signature/Registered Agent

11/13/13

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.

Sandra L Sims

Required Signature/Incorporator

11/13/13

Date