P140000 2716

(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:

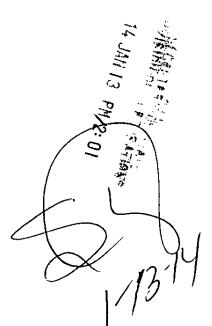




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COVER LETTER

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

SUBJECT: TIMOTY J. MECNAN P. A. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
	(PROPOSED CORPORAT	E NAME - MUST INCL	UDE SUFFIX)			
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	l a check for:			
\$70.00	□ \$78.75	378. 75	3 \$87.50			
Filing Fee	Filing Fee	Filing Fee	Filing Fee,			
7	& Certificate of Status	& Certified Copy				
			& Certificate of			
	i		Status			
		ADDITIONAL CO	PY REQUIRED			
						
	~					
FROM:	7/im 11/0	eenan				
FROM: Mame (Printed or typed)						
9646 Deac Valle Delve						
9646 Deer Valley DR. Ve						
	··	our cos				
	Tallahassee	F1 3:	2312			
	City, S	Stale & Zip				
960- 284- 924A						
850 - 284 - 9240 Daytime Telephone number						
	Tim_Me	reman@ ya	hoo 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)

e name of the corpora	ion shall be: Timothy	J, M	leena	D. F	.A.	
TICLE II PRI	Principal <u>street</u> address <u>er Valley Drive</u> <u>essee</u> , FL 32312	Mai	iling address, if	l different is	s:	- 2312
RTICLE III PUR e purpose for which (POSE ne corporation is organized is: To To The practice	serve a of law a	s a pr	ofess,	une)	
						<u>, </u>
	RES stock is: ///// . TIAL OFFICERS AND/OR DIRECTORS	5				
number of shares of	stock is: /000	Name and Title:			14 Jan 13 Bill 206	
TICLE V INI Name and Title Address	Slock is: 1000. TIM Meenan Productions 9446 Deer ValleyD	Name and Title: Address: Name and Title: Address:			O _O ,	

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT ac	countable) of the registered agent is:
	ceptable) of the registered agent is.
Name: TM Meenan	
Address: 9646 Deer Val Tallahassee,	Mey Drive
Tallahassee,	FL 32312
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: I'm Meen	<u>a0</u>
Address: 9446 Deer	Valley On
Address: <u>9446</u> <u>Deer</u>	FL 32312
Having been named as registered agent to accept service this certificate. I am familiar with and accept the appoint	e of process for the above stated corporation at the place designated in tment as registered agent and agree to act in this capacity
Required Signature/Registered	1-13-2014
Required Signature/Registered	Agent Date
I submit this document and affirm that the facts stated document to the Department of State constitutes a third o	herein are true. I am aware that the fulse information submitted in a degree felony as provided for in s.817.155, F.S.
Menny J. Required Signatury/Incorpor	1-13-2014 Page
i, adaired organical principo	