

P14 0000002887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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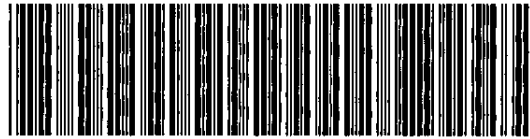
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/07/14--01011--004 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2014 JAN - 7 PM 2:00

141

COVER LETTER

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

SUBJECT: Shannon Tomlinson 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: Shannon Tomlinson

Name (Printed or typed)

3799 NW 2nd Court

Address

Boca Raton, FL 33458

City, State & Zip

(561) 756-5460

Daytime Telephone number

shanelltomlinson@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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DIVISION OF CORPORATIONS

ARTICLE I. NAME

The name of the corporation shall be: Shannon Tomlinson P.A.

2014 JAN -7 PM 2:00

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3799 NW 2nd Court

Boca Raton, FL 33458

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The corporation is being formed for the practice of Real Estate services and all other activities permitted under applicable law.

ARTICLE IV SHARES

The number of shares of stock is: 2,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>President</u>	Name and Title:	<u>Shannon Tomlinson</u>
Address	<u>3799 NW 2nd Court</u> <u>Boca Raton, FL 33458</u>	Address:	<u>3799 NW 2nd Court</u> <u>Boca Raton, FL 33458</u>
Name and Title:	<u>Secretary</u>	Name and Title:	<u>Shannon Tomlinson</u>
Address	<u>3799 NW 2nd Court</u> <u>Boca Raton, FL 33458</u>	Address:	<u>3799 NW 2nd Court</u> <u>Boca Raton, FL 33458</u>
Name and Title:	<u>Treasurer</u>	Name and Title:	<u>Shannon Tomlinson</u>
Address	<u>3799 NW 2nd Court</u> <u>Boca Raton, FL 33458</u>	Address:	<u>3799 NW 2nd Court</u> <u>Boca Raton, FL 33458</u>

(conti.)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

2014 JAN - 7 PM 2: 00

ARTICLE VI REGISTERED AGENT

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

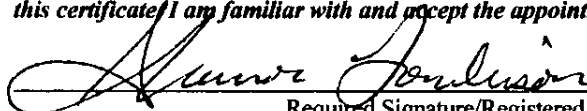
Name: Shannon Tomlinson
Address: 3799 NW 2nd Court
Boca Raton, FL 33458

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shannon Tomlinson
Address: 3799 NW 2nd Court
Boca Raton, FL 33458

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

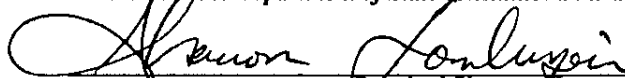


Required Signature/Registered Agent

1/2/2013

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

1/2/2013

Date