

Division of Corporations

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**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

Division of Corporations
Fax Number : (850) 617-6381

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Account Name : DORAL NOTARY CORPORATE FILING, INC
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
CHERYL D. CHAPMAN, PhD, PA**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2014 FEB - 3 PM 12:50

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February 3, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DORAL NOTARY CORPORATE FILING, INC

SUBJECT: CHERYL D. CHAPMAN, PHD, PA
REF: W14000006250

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The specific business purpose of the professional association must be stated in the document.

A copy of a license or other legal authorization verifying the rendering of a personal service must accompany your articles of incorporation as a professional association.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: H14000023103
Letter Number: 814A00002102

P.O BOX 6327 - Tallahassee, Florida 32314

RECEIVED
14 FEB -3 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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2014 FEB -3 PM 12:50

ARTICLE I NAME

The name of the corporation shall be:

CHERYL D. CHAPMAN, PhD, PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

83 N.E. 100TH STREET
MIAMI SHORES, FLORIDA 33138

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**TO PROVIDE BUSINESS MANAGEMENT CONSULTING AND COMMUNICATION
SERVICES TO NON PROFIT ORGANIZATIONS**

ARTICLE IV SHARES

The number of shares of stock is:

1,000 SHARES AT \$1.00 PAR VALUE PER SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**CHERYL D. CHAPMAN
PRESIDENT AND DIRECTOR
83 N.E. 100TH STREET
MIAMI SHORES, FLORIDA 33138**

ARTICLE VI REGISTERED AGENT

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

**TIMOTHY S. FOSTER
83 N.E. 100TH STREET
MIAMI SHORES, FL 33138**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**CHERYL D. CHAPMAN
83 N.E. 100TH STREET
MIAMI SHORES, FL 33138**

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

Timothy S. Foster
Signature/Registered Agent

1/27/14
Date

Cheryl D. Chapman
Signature/Incorporator

1/27/14
Date

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