

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

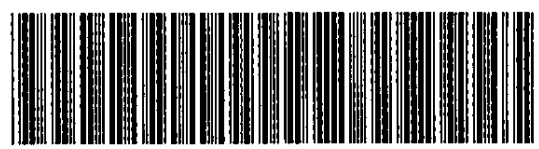
☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: PAVLA Gibson 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: PAVLA Gibson
Name (Printed or typed)

7200 SW 20 ST
Address

PLANTATION, FL 33317
City, State & Zip

954 - 330 - 4762
Daytime Telephone number

PAVLARealtor@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:

PAULA GIBSON P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2201 West Prospect Rd. Suite 200
Fort Lauderdale, FL 33309

7200 SW 20 ST
PLANTATION, FL 33317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to practise as realtor
in the state of Florida

ARTICLE IV SHARES

The number of shares of stock is:

1,500.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

PAULA GIBSON President

Name and Title:

Address

7200 SW 20 ST
PLANTATION, FL 33317

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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DIVISION OF CORPORATIONS

(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: PAULA GIBSON
Address: 7200 SW 20 ST
PLANTATION, FL 33317

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PAULA GIBSON
Address: 7200 SW 20 ST
PLANTATION, FL 33317

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

Paula Gibson / Incorporator 2/18/2014
Required Signature/Registered Agent 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 Date