

P14000021876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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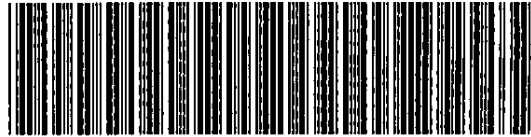
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 10 PM 2:37

3/11/14

COVER LETTER

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

SUBJECT: Circle of Life Legal Services, 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: Martyn S. Elberg

Name (Printed or typed)

101 NE 3rd Avenue, Suite 1500

Address

Fort Lauderdale, FL 33301

City, State & Zip

954-740-2852

Daytime Telephone number

martyelberg@yahoo.com

E-mail address: (to be used for future annual report notification)

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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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ARTICLE I NAME

The name of the corporation shall be: Circle of Life Legal Services, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

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Mailing address, if different is:

101 NE 3rd Ave., Suite 1500

Fort Lauderdale, FL 33301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide legal services.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Martyn S. Elberg, CEO

Name and Title: _____

Address 1731 SE 15th Street

Address: _____

Apt 614

Fort Lauderdale

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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:

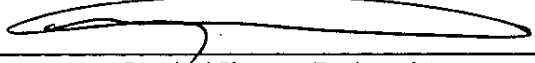
Name: Martyn S. Elberg
Address: 101 NE 3rd Ave, Suite 1500
Fort Lauderdale, FL 33301

ARTICLE VII INCORPORATOR

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

Name: Martyn S. Elberg
Address: 101 NE 3rd Ave, Suite 1500
Fort Lauderdale, FL 33301

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

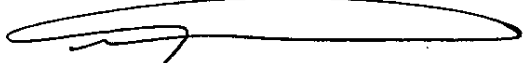


Required Signature/Registered Agent

03-05-2014

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

03-05-2014

Date

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