

P/4000025877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

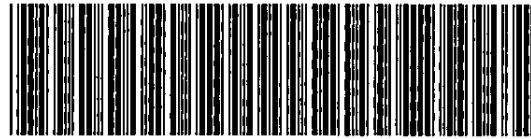
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/21/14--01003--003 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03/24/14

COVER LETTER

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

SUBJECT: Sara L.W. Silverman, 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: Sara L.W. Silverman

Name (Printed or typed)

11144 NW 72 Place

Address

Parkland, Florida 33076

City, State & Zip

954-325-6061

Daytime Telephone number

slws82@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: Sara L.W. Silverman, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11144 NW 72nd Place

Parkland, Florida 33076

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: a law firm rendering professional legal services and all related lawful business

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sara L.W. Silverman, P

Name and Title: _____

Address: 11144 NW 72 Place

Address: _____

Parkland, FL 33076

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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TALLAHASSEE, FLORIDA

(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: Sara L.W. Silverman
 Address: 11144 NW 72 Place
Parkland, FL 33076

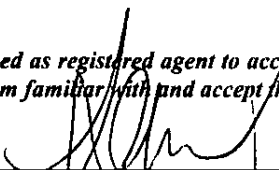
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sara L.W. Silverman
 Address: 11144 NW 72 Place
Parkland, FL 33076

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 TALLAHASSEE, FLORIDA

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

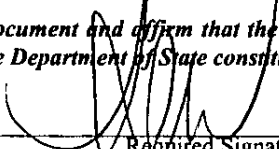


 Required Signature/Registered Agent

3/18/14

 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

3/18/14

 Date