

P14 000027953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

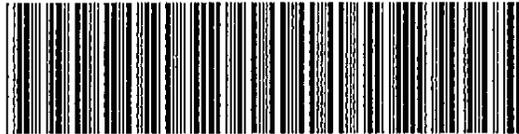
MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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14 MAR 25 PM 3:19

SECRETARY OF STATE
DIVISION OF CORPORATIONS

3/10/14 Office Use Only

B w1400015188

B2428/14

COVER LETTER

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

SUBJECT: Michael L. Broadus, 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: Michael L. Broadus

Name (Printed or typed)

P.O. Box 75383

Address

Tampa, FL 33675

City, State & Zip

(813) 846-9067

Daytime Telephone number

michaelbroaduspa@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: Michael L. Broadus, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1120 E. Twiggs Street
Unit C331
Tampa, FL 33602

Mailing address, if different is:
P.O. Box 75383
Tampa, FL 33675

ARTICLE III PURPOSE

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

ARTICLE IV SHARES 100
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael L. Broadus, CEO
Address: 1120 E. Twiggs Street
Unit C331
Tampa, FL 33602

Name and Title: _____
Address: _____

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(cont)

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: Michael L. Broadus
 Address: 1120 E. Twiggs St. Unit C331
Tampa, FL 33602

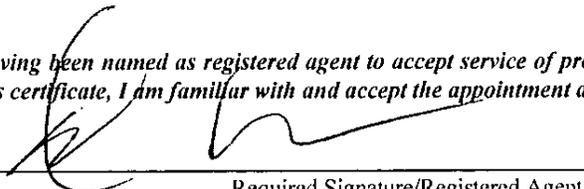
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ARTICLE VII INCORPORATOR

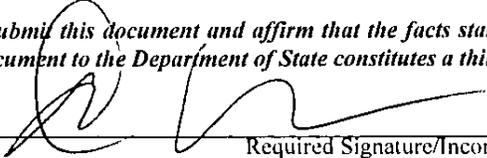
The **name and address** of the Incorporator is:

Name: Michael L. Broadus
 Address: ~~P.O. Box 75383~~
Tampa, FL ~~33602~~

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

 03/21/2014
 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.

 03/21/2014
 Required Signature/Incorporator Date