

P14 000042716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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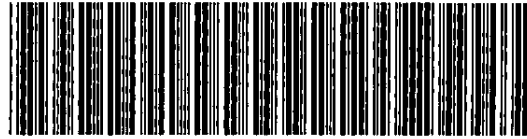
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY 12 AM 9:04

FCOS  
CL 5/14/14

## COVER LETTER

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

SUBJECT: BARRY GAINSBURG, PA  
(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: BARRY GAINSBURG  
Name (Printed or typed)

607 SEA TURTLE WAY  
Address

PLANTATION, FL 33327  
City, State & Zip

954-559-6853  
Daytime Telephone number

Gainsburg@bellsouth.net  
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: BARRY Gainsburg, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

607 Sea Turtle Way  
Plantation, FL 33324

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: LAW firm practice

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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DIVISION OF CORPORATIONS  
14 MAY 12 AM 9:04

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: BARRY Gainsburg, Director Name and Title: \_\_\_\_\_

Address 607 Sea Turtle Way Address: \_\_\_\_\_  
Plantation, FL 33324

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: Benny K. Gainsburg  
Address: 607 Sea Turtle Way  
Plantation, FL 33324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Benny K. Gainsburg  
Address: 607 Sea Turtle Way  
Plantation, FL 33324

*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*

Benny K. Gainsburg  
Required Signature/Registered Agent

5-8-14  
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.*

Benny K. Gainsburg  
Required Signature/Incorporator

5-8-14  
Date