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SECRETARY OF STATE
TAND AREASSEE FLORIDA

3.

COVER LETTER

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

Law Office of Julie D. Young, 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: \$87.50 \$70.00 **□** \$78.75 **□** \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Julie D. Young 200 S.E. 6th Street Suite 205 Fort Lauderdale, FL 33301 City, State & Zip 954-270-9218 Daytime Telephone number julieyoung7711@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)

The name of the corporation shall be: Law Office of Julie 1	S. Young, P.A.
ARTICLE II PRINCIPAL OFFICE Principal street address M	failing address, if different is:
200 S.E. 6th Street	, , , , , , , , , , , , , , , , , , ,
Suite 205	
Fort Lauderdale, FL 33301	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
To perform legal services in the	State of Florida.
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Julie D. Young, President Name and Title: Address 200 S.E. G. Stroet Address:	TALLAHAY 16
Suite 205	mo P
Fort Lauderdale, FL 33301	
Name and Title: Roberta Young, Secretary & Treasur	er gri en
Address 200 S.E. 6th Street Address:	
Suite 205	
Fort Laudordale, FL 33301	
Name and Title: Name and Title:	
Address Address:	

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) Name: Julie D. Young Address: Address: Tort Lauderdale FL	
The name and address of the Incorporator is:	uite 205 33301
Having been named as registered agent to accept service of proceedings certificate, I am familiar with and accept the appointment as Required Signature Registered Agent I submit this document and affirm that the facts stated herein a document to the Department of State constitutes a third degree fee	ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity S 13 14 Date The corporation of the place designated in the place de
Required Signature/Incorporator	2) 13/19 SEC 14

HAY IS AN 7: 40

CORETARY DE STATE
LAHASSEE PLORIDA