

P14000054077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

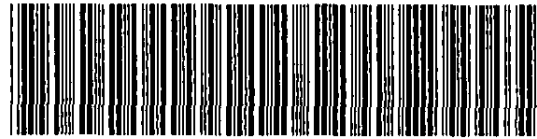
(Business Entity Name)

(Document Number)

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14 JUN 20 AM 8:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

06/23/14

**CT Corporation System**

515 E Park Avenue, Tallahassee, FL, 32301 850-222-1092

**URS Florida Advisory Services, Inc.**

☐ Nonprofit

☐ Amendment

☐ Merger

☒ Domestic Corporation

**Qualification**

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☐ LLC

☐ Annual Report

☐ Other

☐ Certified Copy

☐ Name Registration

☐ UCC

☐ Fictitious Name

☐ CUS

☐ Photo Copy

☒ Walk In

☐ After 4:30

☐ Mail Out

☐ Will Wait

☒ Pick Up

Name

Availability

6/20/2014

Order#:

Document

**9183910**

Examiner

**KM**

Updater

Ref#:

Verifier

W.P. Verifier

Amount: \$

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607, F.S. (Profit)

Article I. The name of the corporation shall be **URS Florida Advisory Services, Inc.**

Article II. The principal office of the corporation shall be:

1625 Summit Lake Drive, Suite 200  
Tallahassee, FL 32317

and the mailing address of the corporation shall be:

600 Montgomery Street, 25<sup>th</sup> Floor  
San Francisco, CA 94111.

Article III. The purpose of the corporation shall be to engage in any lawful act or activity permitted in which corporations may be incorporated under Chapter 607 of the Florida Business Corporation Act.

Article IV. The number of shares the corporation shall be authorized to issue is 1,000 common shares.

Article V. The name and Florida street address of the registered agent is:

C T Corporation System  
1200 South Pine Island Road  
Plantation, FL 33324.

Article VI. The name and address of the Incorporator is:

Kristin L. Jones  
600 Montgomery Street, 25<sup>th</sup> Floor  
San Francisco, CA 94111.

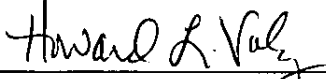
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*Having been named as the registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

C T Corporation System

**Howard L. Volz**  
**Asst. Secretary**

By:



Required Signature/Registered Agent

June 19, 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

June 18, 2014

Date

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