## P1400057393

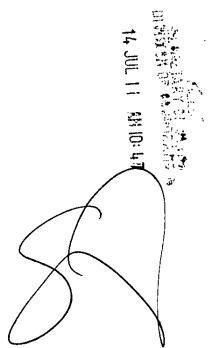
(Re	questor's Name)			
(Address)				
(Ad	dress)	<u></u>		
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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## **COVER LETTER**

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

SUBJECT: DE	bra A Roth, P.A	١.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation an	d 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 CO	PY REQUIRED
FROM:	Debra A Roth		
PROM.	Name	e (Printed or typed)	middle - R
	2200 Ocean Dr	S, PH3	
		Address	
	lacksonville Bea		0
_	City	State & Zip	
3	352-263-3161		
<u></u>	Daytime 7	elephone number	

NOTE: Please provide the original and one copy of the articles.

droth321@yahoo.com

E-mail address: (to be used for future annual report notification)

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) OF THE PROPERTY OF THE PROPERTY OF THE ARTICLE I NAME
The name of the corporation shall be: Debra A Roth, PA 14 JUL 11 AM 10: 47 ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if different is: 2200 Ocean Dr S, PH3 Jacksonville Beach, FL 32250 The purpose for which the corporation is organized is: To help buyers and sellers with Real Estate transactions. Real Estate Sales Associate ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Debra A Roth, President Name and Title: 2200 Ocean Dr S Address Address: PH3 Jacksonville Beach, FL 32250 Name and Title:\_\_\_\_\_\_ Name and Title:\_\_\_\_\_ Address Name and Title: Name and Title:\_ Address \_\_\_\_\_ Address:

Name an	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Fl</u>	orida street address (P.O. Box NOT acceptable) of Debra A Roth	the registered agent is:	
Name:	<u></u>		
Address:	2200 Ocean Dr S, PH3		
	Jacksonville Beach, FL 32250		
ARTICLE VII	INCORPORATOR		
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	Debra A Roth		
Address:	2200 Ocean Dr S, PH3		
	Jacksonville Beach, FL 32250		
	ned as registered agent to accept service of process of frocess of frocess of frocess of familiar with and accept the appointment as regional.		
Me	Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are to Department of State constitutes a third degrec felony		
Ella Cl	Total-		07/05/2014
	Required Signature/Incorporator		Date