

P14000068273

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
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From: Account Name : ROBERT LEE SHAPIRO, P.A.
Account Number : I19990000101
Phone : (561) 691-0059
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

14 AUG 14 AM 11:08

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Djr1@bellsouth.net

FLORIDA PROFIT/NON PROFIT CORPORATION

Jennifer L. Morton, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

June

AUTHORIZATION BY PHONE TO
CORRECT PA purpose
DATE 8/15/14
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Corporate Filing Menu

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August 14, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ROBERT LEE SHAPIRO, P.A.

SUBJECT: JENNIFER L. MORTON, P.A.
REF: W14000049838

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The specific business purpose of the professional association must be stated in the document.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: B14000190773
Letter Number: B14A00017489

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P.03/04

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

14 AUG 14 AM 11:08

ARTICLE I NAMEThe name of the corporation shall be: Jennifer L. Morton, P.A.SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE II PRINCIPAL OFFICE**Principal street address11430 US Highway 1North Palm Beach, FL 33408

Mailing address, if different is:

11430 US Highway 1North Palm Beach, FL 33408**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

landscape architectural**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Jennifer L. Morton, President

Name and Title: _____

Address: 11430 US Highway 1

Address: _____

North Palm Beach, FL 33408

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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P.04/04
(cont.)

14 AUG 14 AM 11:08

Name and Title:	_____	Name and Title:	SECRETARY OF STATE
Address	_____	Address:	TALLAHASSEE FLORIDA
_____	_____	_____	_____
_____	_____	_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

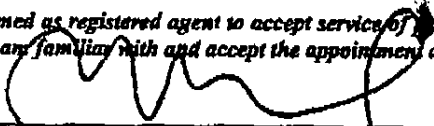
Name: Dean Rosenbach
Address: 11430 US Highway 1
North Palm Beach, FL 33404

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dean Rosenbach
Address: 11430 US Highway 1
North Palm Beach, FL 33404

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

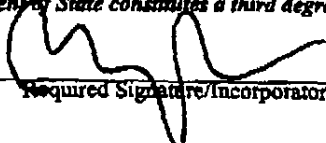


Required Signature/Registered Agent

8/13/2014

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

8/13/2014

Date

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