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(Business Entity Name)

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Special Instructions to Filing Officer:

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TO THE  
STATE OF TEXAS  
SECRETARY OF STATE

2014 FEB 20 PM 2:41

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STATE OF TEXAS  
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SEP -4 PM 12:43

STATE OF TEXAS  
SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 21, 2014

CORPORATE ACCESS

SUBJECT: LONDON BAY COMMUNITY INVESTMENTS, LLC  
Ref. Number: M09000000049

We have received your document for LONDON BAY COMMUNITY INVESTMENTS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is no provision in the law that allows a foreign llc to file a statement of authority.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 114A00003919

*Please use for  
this filing*

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

PICK UP: 9/3 Glinda

☒ CERTIFIED COPY

☐ PHOTOCOPY

☒ CUS GS

☒ FILING Articles

1. Robert A. Bauman, P.A.

(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

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DIVISION OF CORPORATIONS

SPECIAL INSTRUCTIONS:

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\_\_\_\_\_

## COVER LETTER

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

SUBJECT: Robert A. Bauman, 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:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Robert A. Bauman  
Name (Printed or typed)

13601 Waterfall Way  
Address

Tampa, FL 33624  
City, State & Zip

(813) 376-3810  
Daytime Telephone number

bbaumanlaw@yahoo.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)

**ARTICLE I NAME**

The name of the corporation shall be:

Robert A. Bauman, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

13601 Waterfall Way  
Tampa, FL 33624

Mailing address, if different is:

P.O. Box 21623  
Tampa, FL 33622-1623

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

law practice

**ARTICLE IV SHARES**

The number of shares of stock is:

10

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

Name and Title:

Robert A. Bauman - P/D/ST

Name and Title:

Address

P.O. Box 21623

Address:

Tampa, FL 33622-1623

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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(cont.)

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: Robert A. Bauman  
Address: 13601 Waterfall Way  
Tampa, FL 33624

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Robert A. Bauman  
Address: P.O. Box 21623  
Tampa, FL 33622-1623

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

[Signature]  
Required Signature/Registered Agent

9/2/14  
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.

[Signature]  
Required Signature/Incorporator

9/2/14  
Date