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## **COVER LETTER**

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

DIANA E. JANSEN, P.A.

(PROPOSED CORPORATE NAME - MUST INCLUDE

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$78.75 \$87.50 \$70.00 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, Certified Copy & Certificate of Status & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

B.A. FLOWERS. INC.-BEVERLEE A. FLOWERS Name (Printed or typed) 644 CESERY BLVD., STE. 280 Address JACKSONVILLE, FL 32211 City, State & Zip 904-725-3677 Daytime Telephone number BAFLOWERS@BAFLOWERS.NET 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 corporati	ion shall be: DIANA E. JANSEN	N, P.A.		
ARTICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is:		
255 PLAZA ST	reet			
ATLANTIC BE	ACH, FL 32233			
ARTICLE III PURI	POSE TO FNG	AGE IN SERV	CES AND ACTIVITIES	
	ic corporation is organized is.			
ASSOCIATED	WITH THE LISTING AND	SALE OF R	EAL ESTATE, BUTH	
COMMERCIA	L AND RESIDENTIAL AS	A SALES AS	SOCIATE.	
			20	
		<u> </u>	LIAH SCI	
			خير المراجة	
			SSE	
			mg <b>72</b>	
The number of shares of s	RES 1000 COMMON		STATE FLORE	
			RID.	
	TAL OFFICERS AND/OR DIRECTOR	<u>s</u>	<b>39</b>	
Name and Title	DIANA E. JANSEN, PST	Name and Title:		
Address	255 PLAZA STREET	Address:		
Address	ATLANTIC BEACH, FL 32233	Address:		
	71EANTO BE/1011, 1 E 02200	· · · · · · · · · · · · · · · · · · ·		
Name and Title:	······································	Name and Title:		
Address		Address:		
		<del></del>		
Name and Titles		Name and Title		
Name and Title:				
Address		Address:		

Name and	d Title:	Name and Title:	
Address		Address:	
ARTICLE VI The name and Flo	<b>REGISTERED AGENT</b> orida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	DIANA E. JANSEN	_	
Address:	255 PLAZA STREET		
	ATLANTIC BEACH, FL 32233	- -	
ARTICLE VII	INCORPORATOR	TALLA	r si
The name and ad	Idress of the Incorporator is:		i.
Name:	B.A. FLOWERS, INC.	SSE O	r M
Address:	644 CESERY BLVD., STE. 280	TO R	
	JACKSONVILLE, FL 32211	2:21 STATE LORID	<u>,</u>
	ned as registered agent to accept service of process am familiar with and accept the appointment as reg	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity	7
	Required Signature/Registered Agent	Date	
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S.	ı
	Sumula A 199	10/1/14	

## B.A. Flowers Inc.

Licensed Tax Preparation & Representation • Small Business Planning & Bookkeeping Services

October 10, 2014

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Articles of Incorporation Diana E. Jansen, P.A.

Dear Sir/Madam,

Please see the attached Articles' of Incorporation for our client listed above. The client has no intention of reinstating the prior corporation and wish to release the name above for immediate use. Mrs. Diana E. Jansen, President of the Corporation, has also signed this statement below.

I have enclosed the necessary payment for the new corporation along with two (2) copies of the articles.

Thank you for your help in this matter. Please contact me if you have any questions or concerns regarding this issue.

Sincerely,

Beverlee A. Flowers, E.A.

President

B.A. Flowers, Inc.

Enclosure: Articles of Incorporation

President, Diana E. Jansen, P.A.