Florida Department of State

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FLORIDA PROFIT/NON PROFIT CORPORATION

Leslie Longshore, P.A.

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, herby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Leslie Longshore, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

4825 W. Bay Villa Avenue Tampa, FL 33611

ARTICLE III SHARES

ARTICLE IV PURPOSE

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,500 Shares at No Par Value

The purpose for which this corporation is/are formed, are as follows:

To practice the profession of: Law

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940 14 NOV 21 PN 5: 31

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Leslie Longshore 4825 W. Bay Villa Avenue Tampa, FL 33611

ARTICLES VI INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Leslie Longshore - President/Director 4825 W. Bay Villa Avenue, Tampa, FL 33611

ARTICLES VII INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Leslie Longshore 4825 W. Bay Villa Avenue, Tampa, FL 33611

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

17th day of November 20 14

Keslie Longshore

SIGNATURE

SIGNATURE

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Leslie Longshore, P.A.	· ·
2. The name and address of the registe	red agent and office is:	
	Leslie Longshore	
	Name	
	4825 W. Bay Villa Avenue	
	(P.O. Box or Mail Drop Box NOT Acceptable)	
,	Tampa, FL 33611	
	(City / State / Zip)	
corporation at the place designated agent and agree to act in this capact	gent and to accept service of process for the above stated in this certificate, I hereby accept the appointment as registery. I further agree to comply with the provisions of all the state performance of my duties, and um familiar with and accept the agent.	NOV 21 PH 5: 3
Gerly Snigsh	11/17/2014	- B
Leslie Longshore	(Date)	

(Date)