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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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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: Bryce James Davis,	P.A.	
(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	eles of incorporation and	l a check for:
☐ \$70.00 ☐ \$78.75 Filing Fee	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Bryce James Davis	5	
Name	(Printed or typed)	
730 7th Street		
A	ddress	
Clermont, FL 3471	1 State & Zip	
(352) 577-8740	naic & Zip	

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

Daytime Telephone number

brycejd@gmail.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)

30 7th Street	34711	Mailing address, if different	JAH I 4 PM
lermont, FL	34711	ride professional legal services	14 PM
		ride professional legal services	
purpose for which the co	proporation is organized is: To prov	ride professional legal services	: 55 55
TICLE IV SHARE number of shares of stoci	<u>\$</u> 2.000		
TICLE V INITIAL	. OFFICERS AND/OR DIRECTOR	RS .	
Name and Title:	30 7th Street	Name and Title:	
Addiess	lermont, FL 34711	Address:	
Name and Title:		Name and Title:	
Address			
Name and Title:		Name and Title:	

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and FI Name:	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of Bryce James Davis	f the registered agent is:
Address:	730 7th Street	
	Clermont, FL 34711	77 (77)
ARTICLE VII The name and ad Name: Address:	INCORPORATOR Idress of the Incorporator is: Bryce James Davis 730 7th Street Clermont, FL 34711	PM 1:55
this certificate I	om familiar with and accept the appointment as rea	for the above stated corporation at the place designated in sistered agent and agree to act in this capacity
mr.	Required Signature/Registered Agent	(e. J. Davis 1/2/2015
	Required Signature/Registered Agent	Date
I submit this doc		true. I am aware that the false information submitted in a
Proje	G. Required Signature/Incorporator	1/2/2015
	Required Signature/Incorporator	Date