

P15000010212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

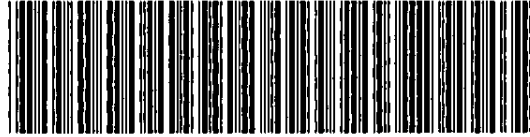
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 JAN 26 PM 1:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2-2-15

## COVER LETTER

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

SUBJECT: Law Offices of Aaron F. Miller, 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 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

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

FROM: Aaron Miller

Name (Printed or typed)

900 SW 20 Street

Address

Fort Lauderdale, FL 33315

City, State & Zip

(305) 342-4444

Daytime Telephone number

law.afm@gmail.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: Law Offices of Aaron F. Miller, P.A.

## ARTICLE II PRINCIPAL OFFICE

Principle Street Address: 900 SW 20<sup>th</sup> Street  
Fort Lauderdale, FL 33315

## ARTICLE III PURPOSE

The purpose for which this corporation is organized is as a law office and for any lawful purpose.

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Aaron F. Miller, President and Director  
Address: 900 SW 20<sup>th</sup> Street  
Fort Lauderdale, FL 33315

## ARTICLE VI REGISTERED AGENT

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

Name: Aaron F. Miller  
Address: 900 SW 20<sup>th</sup> Street  
Fort Lauderdale, FL 33315

## ARTICLE VII INCORPORATOR

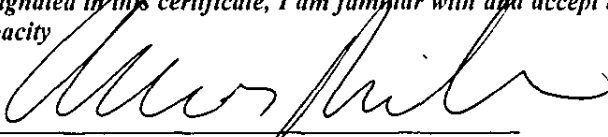
The name and address of the Incorporator is:

Name: Aaron F. Miller  
Address: 900 SW 20<sup>th</sup> Street  
Fort Lauderdale, FL 33315

## ARTICLE VIII EFFECTIVE DATE

The effective date of this corporation shall be January 20, 2015

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

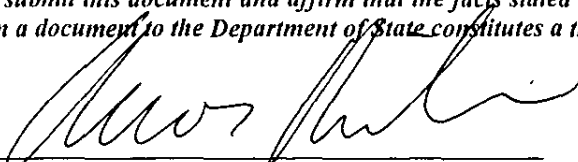


Required Signature/Registered Agent

20 Jan 2015

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

20 Jan 2015

Date

FILED  
15 JAN 26 PM 1:19  
CLERK OF STATE  
TALLAHASSEE, FLORIDA