

P 15000027085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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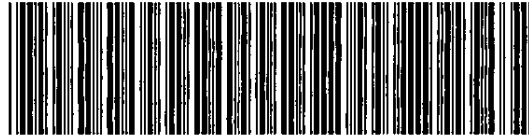
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 MAR 19 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/23/15

COVER LETTER

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

SUBJECT: A. Chiarello Legal, 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: Anthony Chiarello

Name (Printed or typed)

2701 N. Ocean Blvd. 9B

Address

Ft. Lauderdale, FL 33308

City, State & Zip

7544449940

Daytime Telephone number

Chiarello.Anthony@gmail.com

E-mail address: (to be used for future annual report notification)

RECEIVED BY CLERK OF STATE
TALLAHASSEE, FLORIDA

15 MAR 19 PM 4: 02

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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: A. Chiarello Legal, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2701 N. Ocean Drive 9B

Fl. Lauderdale, FL 33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide professional legal services.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anthony Chiarello, President

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Anthony Chiarello

Address: 2701 N. Ocean Blvd. 9B

Ft. Lauderdale, FL 33308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Anthony Chiarello

Address: 2701 N. Ocean Blvd. 9B

Ft. Lauderdale, FL 33308

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

3/15/2015
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

3/15/2015
Date

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TALLAHASSEE, FLORIDA