

P15000030765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

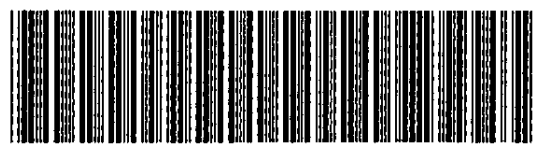
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2015

ANGELO VACCARELLA
6070 N. FEDERAL HWY., SUITE 107
BOCA RATON, FL 33487

SUBJECT: ANGELO VACCARELLA
Ref. Number: W15000020365

We have received your document for ANGELO VACCARELLA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article(s) I - The name of the Corporation & Article V - The name of the President..

The specific business purpose of the professional association must be stated in the document.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 915A00005837

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: ANGELO VACCARELLA P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

ANGELO VACCARELLA
6070 NORTH FEDERAL HWY. SUITE 107
BOCA RATON FLORIDA 33487

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STATE OF FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND LAWFUL BUSINESS IN REAL ESTATE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRESIDENT - ANGELO VACCARELLA

Address: 15634 MESSINA ISLES CT
DELRAY BEACH FLORIDA
33446

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

(conti.)

Name and Title: _____ Name and Title: _____
 Address: _____ Address: _____

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ARTICLE VI REGISTERED AGENT

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

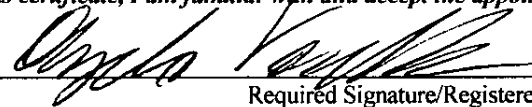
Name: ANGELO VACCARELLA
 Address: 6070 NORTH FEDERAL HWY. SUITE 107
BOCA RATON FLORIDA 33487

ARTICLE VII INCORPORATOR

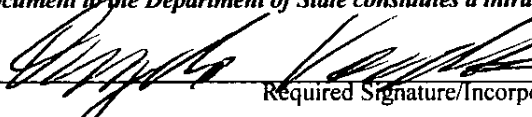
The name and address of the Incorporator is:

Name: ANGELO VACCARELLA
 Address: 15634 MESSINA ISLES CT
DELRAY BEACH FLORIDA 33446

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 3/16/15 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 3/16/15 Date