W/SXXX32744

(Re	equestor's Name)			
(Address)				
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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15 APR -9 PM 12: 06

APR 1 0 2015; S. GILBERT

COVER LETTER

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

SUBJECT:	, ,	orrigan P.	
	(PROPOSED CORPORA	TE NAMP – <u>MUST INCLU</u>	IDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles 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 CO	PY KEQUIKED
FROM:	Karen Co		
···-	12820 8220	St. N. Address	
	West Palm Beach City,	, FL 33412 State & Zip	
	561-324- Daytime T	4094 Telephone number	
	KarenCorriganRe E-mail address: No be use	ealtor@hotmai	l. COM notification)

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



15 APR -9 AM IO: 40

March 20, 2015

KAREN CORRIGAN 12820 82ND ST.N. WEST PALM BEACH, FL 33412

SUBJECT: KAREN CORRIGAN P.A.

Ref. Number: W15000019726

We have received your document for KAREN CORRIGAN P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

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.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 015A00005626

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

_	tion shall be: Karen (irrigan P.A.	<u>- ED</u>
12820 8	NCIPAL OFFICE Principal street address	Mailing address, if different ALLAHASSE	PM 12: 06 OF STATE FLORIDA
The purpose for which t	POSE the corporation is organized is: +c	do real estate as a	realtor
ARTICLE IV SHA	RES		
The number of shares of	stock is: 100	npresident	
Address	12820 82 No St 1 West Palm Beach FL 33412	· '	
Name and Title:		Name and Title:Address:	

Name and Title:	Name and Title:
Address	Address:
· 	

ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptab	ole) of the registered agent is:
Name: Karen Corrigo	in
Address: 12820 82NO ST/	$\overline{\mathcal{N}'}$
West Palm Beach, F	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: Karen Corrigan	<u>) </u>
Address: 12820 82No S	<u>t N.</u>
West Palm Beach,	FL 33412
Having been named as registered agent to accept service of pro this certificate, I am familiar with and accept the appointment a	ocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
Required Signature/Registered Agent	3/10/15
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein document to the Department of State constitutes a third degree	are true. I am aware that the false information submitted in a felony as provided for in s.817.155, F.S.
Karen Corrigan	3/10/15
Required Signature/Incorporator	Date