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# **COVER LETTER**

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

<sub>SUBJECT:</sub> La	aw Office of David		
***************************************	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an o	original and one (1) copy of the ar	ticles of incorporation and	d a check for:
■ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED
FROM:	David J. Sockol		
	Nam	e (Printed or typed)	
	325 5th Street Soi	uth	
-		Address	
	St. Petersburg, FL	. 33701	
	City	, State & Zip	

727-822-5200

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

Daytime Telephone number

Sockolpa@sockol.com

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

# SOCKOL & ASSOCIATES, P.A.

ATTORNEYS AT LAW

David J. Sockoi

325 5<sup>th</sup> Street South St. Petersburg, Florida 33701 Telephone: (727) 822-5200 Facsimile: (727) 821-5319 Email: sockolpa@sockol.com

#### **FACSIMILE TRANSMISSION COVER SHEET**

To: Florida Department of State Jessica A. Fason	To:	
Fax #: 850-245-6804	Fax #:	
From: Jennifer Oster, Paralegal		
Date: April 21, 2015		
Re: Law Office of David J. Sockol, P.A.		

PAGES INCLUDING COVER SHEET: 5

Hello Jessica,

Per our conversation today, I have attached the corrected Articles of Corporation, Re: The above referenced. Please let me know if you need anything further.

Thank you for your assistance,

Jennifer Oster

THE INFORMATION CONTAINED IN THIS FACSIMILE TRANSMISSION IS ATTORNEY-CLIENT PRIVILEGED AND CONFIDENTIAL. IT IS INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS TELECOPY IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS TELECOPY IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL TO US AT THE ADDRESS LISTED ABOVE VIA U.S. MAIL.



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 12, 2015

DAVID J. SOCKOL 325 5TH ST S ST. PETERSBURG, FL 33701

SUBJECT: LAW OFFICE OF DAVID J. SOCKOL, P.A.

Ref. Number: W15000002144

We have received your document for LAW OFFICE OF DAVID J. SOCKOL, P.A. and your check(s) totaling \$70.00. 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 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.

Letter Number: 215A00000618

Jessica A Fason Regulatory Specialist II

www.sunbiz.org

#### **COVER LETTER**

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

SUBJECT: Law Office of David J. Sockol, P.A.				
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
Enclosed are an original \$70.00 Filing Fee	inal and one (1) copy of the and \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	

FROM:	David J. Sockol		
Name (Printed or typed)			
	325 5th Street South		
	Address		
	St. Petersburg, FL 33701		
	City, State & Zip		
	727-822-5200		
	Daytime Telephone number		
	Sockolpa@sockol.com		
	E-mail address: (to be used for future annual report notification)		

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

From:Sockol & Associates ,PA

## ARTICLES OF INCORPORATION

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

RTICLE II PR	INCIPAL OFFICE	,	arte de la	
25 5th Stree	Principal <u>street</u> address	Į.	Mailing address, if different is:	
	g, FL 33701			
	9,1200.01		<del></del>	
RTICLE III PUI	DRACE			
e purpose for which	the corporation is organized is: The Pra	ctice of Re	endering Legal Services.	<u>.</u>
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RTICLE IV SH	ARES 4			
RTICLE IV SH ne number of shares o				
e number of shares o	of stock is:	S		~
ne number of shares of	of stock is:  ITIAL OFFICERS AND/OR DIRECTORS	<del>-</del>	David J. Sockol, Secretary	
RTICLE V IN	of stock is:	Name and Title:	David J. Sockol, Secretary 325 5th Street South	~
ne number of shares of	of stock is: I ITIAL OFFICERS AND/OR DIRECTORS Ilo: David J. Sockol, President	<del>-</del>		<b></b>
RTICLE V IN	of stock is: Interest is: Inter	Name and Title:	325 5th Street South	-
RTICLE V IN  Name and Tit  Address	ittal officers AND/OR DIRECTORS lo: David J. Sockol, President 325 5th Street South St. Petersburg, FL 33701	Name and Title: Address:	325 5th Street South St. Petersburg, FL 33701	-
RTICLE V IN  Name and Tit  Address	ittal officers and/or directors lic: David J. Sockol, President 325 5th Street South St. Petersburg, FL 33701 c: David J. Sockol, Treasurer	Name and Title: Address:	325 5th Street South St. Petersburg, FL 33701	
RTICLE V IN  Name and Tit  Address	ITIAL OFFICERS AND/OR DIRECTORS  1c: David J. Sockol, President  325 5th Street South  St. Petersburg, FL 33701  c: David J. Sockol, Treasurer  325 5th Street South	Name and Title: Address:	325 5th Street South St. Petersburg, FL 33701	- 15-
RTICLE V IN  Name and Tit  Address	ittal officers and/or directors lic: David J. Sockol, President 325 5th Street South St. Petersburg, FL 33701 c: David J. Sockol, Treasurer	Name and Title: Address:  Name and Title:	325 5th Street South St. Petersburg, FL 33701	15 APR
RTICLE V IN  Name and Tit  Address	ITIAL OFFICERS AND/OR DIRECTORS  1c: David J. Sockol, President  325 5th Street South  St. Petersburg, FL 33701  c: David J. Sockol, Treasurer  325 5th Street South	Name and Title: Address:  Name and Title:	325 5th Street South St. Petersburg, FL 33701	15 APR 21
RTICLE V IN  Name and Tit  Address  Name and Titl  Address	ITIAL OFFICERS AND/OR DIRECTORS  Jo: David J. Sockol, President  325 5th Street South  St. Petersburg, FL 33701  E. David J. Sockol, Treasurer  325 5th Street South  St. Petersburg, FL 33701	Name and Title: Address:  Name and Title: Address:	325 5th Street South  St. Petersburg, FL 33701	21
RTICLE V IN  Name and Tit  Address  Name and Titl  Address	ITIAL OFFICERS AND/OR DIRECTORS  1c: David J. Sockol, President  325 5th Street South  St. Petersburg, FL 33701  c: David J. Sockol, Treasurer  325 5th Street South	Name and Title: Address:  Name and Title: Address:	325 5th Street South  St. Petersburg, FL 33701	

(conti.)

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name: David J. Sockol  Address: 325 5th Street South  St. Petersburg, FL 33701  ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  Name: David J. Sockol  Address: 325 5th Street South  St. Petersburg, FL 33701  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  Tubulation of the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.  1/2/2015  Namired Signature/Registered Nagent In a ware 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.	Name and	Title:	Name and Title:	
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  Name:  David J. Sockol  325 5th Street South  St. Petersburg, FL 33701   ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name:  David J. Sockol  325 5th Street South  St. Petersburg, FL 33701  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  1/2/2015  Required Signature/Registered Agent  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 x817.155, F.S.	Address		Address:	
Name: David J. Sockol  325 5th Street South  St. Petersburg, FL 33701  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: David J. Sockol  Address: David J. Sockol  St. Petersburg, FL 33701  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  1/2/2015  Required Signature/Registered Agent 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.			the registered agent is:	
St. Petersburg, FL 33701  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: David J. Sockol  Address: 325 5th Street South  St. Petersburg, FL 33701  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  1/2/2015  Required Signature/Registered Agent  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.			the registered agent is.	
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Name: David J. Sockol  Address: 325 5th Street South  St. Petersburg, FL 33701  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  1/2/2015  Required Signature/Registered Agent  I submit this document and affirm that the facts stated herein are true. I am aware that the faise information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.	Address:	325 5th Street South		
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Name:    David J. Sockol	ARTICLE VII	INCORPORATOR		
Address:  325 5th Street South  St. Petersburg, FL 33701  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  1/2/2015  Required Signature/Registered Agent  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.	The name and ad	dress of the Incorporator is:		
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this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity  1/2/2015  Required Signature/Registered Agent  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.		St. Petersburg, FL 33701		
Required Signature/Registered Agent  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.				
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.	W -	21 20		1/2/2015
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		Required Signature/Registered Agent		Date
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Required Signature/Incorporator Date	D.	or Ser		1/2/2015
		Required Signature/Incorporator		Date