

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Number : I19980000102 Phone : (954)428-8899 Fax Number : (954)428-6699

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Email Address: WATTSUPAUSD Cyahoo.com

FLORIDA PROFIT/NON PROFIT CORPORATION MARGARET A. WATTS, P.A.

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Electronic Filing Menu

Corporate Filing Menu

Help

5/12/2015

May.11.2015 04:25 AM MARGARET WATTS

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PAGE. 4/ 4
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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SEGRETARY OF STATE TALL AMASSEE, FLORIDA

CLE II BRI	VCIRAL OFFICE Principal street address	Mailing ad	bess, if different is:
O TWIN EA	GLE LANE		
RT MYERS	S, FL 33912		
			·
CLE III PUR Epose for which i	PORB he corporation is organized in REAL E.	STATE	
			
	·		
			•
	ARES 1000 TIOCK IS:		:
Name and Tir	TIAL OFFICERS AND/OR DIRECTORS	Name and Title:	:
icle v ini	tial officers and/or directors	Name and Title:	·
Name and Tir	TIAL OFFICERS AND OR DIRECTORS IN MARGARET A. WATTS 7600 TWIN EAGLE LANE	Name and Title:	
Name and Tiz	TIAL OFFICERS AND OR DIRECTORS MARGARET A. WATTS 7600 TWIN EAGLE LANE FORT MYERS, FL 33912	Name and Title:	
Name and Tiz	TIAL OFFICERS AND OR DIRECTORS MARGARET A. WATTS 7600 TWIN EAGLE LANE FORT MYERS, FL 33912	Name and Title: Address: Name and Title:	
Name and Title Name and Title	MARGARET A. WATTS 7600 TWIN EAGLE LANE FORT MYERS, FL 33912	Name and Title: Address: Name and Title:	
Name and Title Name and Title	TIAL OFFICERS AND OR DIRECTORS MARGARET A. WATTS 7600 TWIN EAGLE LANE FORT MYERS, FL 33912	Name and Title: Address: Name and Title:	

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PAGE.

H15000115709 3

(cond.) Name and Title:_ Name and 'l'itle: Address Address: REGISTERED AGENT The partie and Florida street address (P.O. Box NOT acceptable) of the registered agent in MARGARET A. WATTS Name: 7600 TWIN EAGLE LANE Address: FORT MYERS, FL 33912 ARTICLE VII INCORPORATOR The name and address of the incorporator is: MARGARET A. WATTS Name: 7600 TWIN EAGLE LANE Address: FORT MYERS, FL 33912 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 to this opposity Required Signature/Registered Agent Date I submit this document and affirm that the facts stated herein are ove. I am aware that the fake information submitted in a document to the Department of State constitutes, a third degree felony as provided for its s.817.155, F.S. Date