

P150000049344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

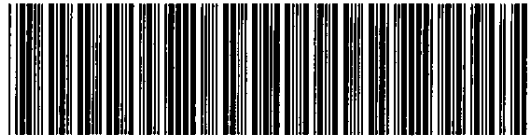
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/26/15--01050--003 \*\*70.00

FILED  
15 JUN -5 AM 8:00  
TALL, OHIO

WIS-37686

## COVER LETTER

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

**SUBJECT:** Jennifer Nebrasky 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:** Jennifer Nebrasky

Name (Printed or typed)

8202 NW 41st Street

Address

Coral Springs, Florida 33065

City, State & Zip

954-687-4147

Daytime Telephone number

jennebrasky@aol.com

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

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



RECEIVED

15 JUN -5 PM 2:25

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SEC. 1 COPY OF STATE  
TALLAHASSEE, FLORIDA

May 28, 2015

JENNIFER NEBRASKY  
8202 NW 41ST ST  
CORAL SPRINGS, FL 33065

SUBJECT: JENNIFER NEBRASKY P.A.  
Ref. Number: W15000037686

We have received your document for JENNIFER NEBRASKY 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 715A00011199

## 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: Jennifer Nebrasky P.A.

### ARTICLE II PRINCIPAL OFFICE

Principal street address

2780 N University Drive

Coral Springs, Florida 33065

Mailing address, if different is:

8202 NW 41st Street

Coral Springs, Florida 33065

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Sales

### ARTICLE IV SHARES

The number of shares of stock is:

ONE (1)

FILED  
15 JUN -5 AM 8:00  
TALLAHASSEE

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jennifer Nebrasky

Address: President

2780 N University Drive

Coral Springs, Florida 33065

Name and Title: Jennifer Nebrasky

Address: Vice President

2780 N University Drive

Coral Springs, Florida 33065

Name and Title: Jennifer Nebrasky

Address: Secretary

2780 N University Drive

Coral Springs, Florida 33065

Name and Title: Jennifer Nebrasky

Address: Treasurer

2780 N University Drive

Coral Springs, Florida 33065

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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: Jennifer Nebrasky

Address: 2780 N University Drive

Coral Springs, Florida 33065

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Jennifer Nebrasky

Address: 2780 N University Drive

Coral Springs, Florida 33065

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15 JUN -5 AM 8:00  
TALLAHASSEE

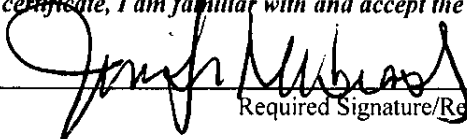
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

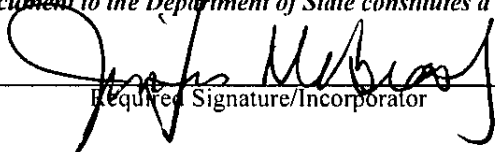


Required Signature/Registered Agent

5/20/15

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

5/20/15

Date