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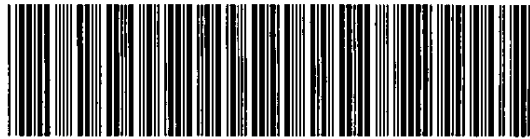
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05/18/15--01023--021 **78.75

FILED
15 JUN -3 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FL 32399

JUN 8 2015
S. GILBERT

COVER LETTER

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

LAW OFFICE OF YENTL MARTINEZ, P.A.

SUBJECT: _____

(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: YENTL MARTINEZ

Name (Printed or typed)

4806 NATIVE DANCER LANE

Address

ORLANDO, FL 32826

City, State & Zip

(407) 453-1069

Daytime Telephone number

YENTL_M@YAHOO.COM

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 JUN -3 AM 9:31

TALLAHASSEE, FLORIDA

May 20, 2015

YENTL MARTNEZ
4806 NATIVE DANCER LANE
ORLAND, FL 32926

SUBJECT: LAW OFFICE OF YENTL MARTINEZ, P.A.
Ref. Number: W15000035907

We have received your document for LAW OFFICE OF YENTL MARTINEZ, 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 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 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: 215A00010691

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: LAW OFFICE OF YENTL MARTINEZ, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
4806 NATIVE DANCER LANE, ORLANDO FL 32826

Mailing address, if different is:

STATE OF FLORIDA
ALLA BACH, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LAW OFFICE. TO PROVIDE LEGAL SERVICES IN DIFFERENT
LEGAL AREAS, INCLUDING BUT NOT LIMITED TO, IMMIGRATION LAW, CRIMINAL LAW, FAMILY LAW,
BUSINESS LAW, AND BANKRUPTCY LAW.

ARTICLE IV SHARES

The number of shares of stock is: ONE THOUSAND 00/100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: YENTL MARTINEZ, ESQUIRE

Address: 4806 NATIVE DANCER LANE
ORLANDO, FL 32826

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ 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: YENTL MARTINEZ
Address: 4806 NATIVE DANCER LANE
ORLANDO, FL 32826

ARTICLE VII INCORPORATOR

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

Name: YENTL MARTINEZ
Address: 4806 NATIVE DANCER LANE
ORLANDO, FL 32826

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.)

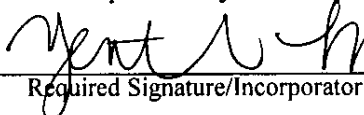
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

5/31/2015
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

5/31/2015
Date