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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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	Office Use Onl	v



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

1-15-15-4

COVER LETTER

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

SEWARD LAW OFFICE, P.A.

SUBJECT:	ED LAW OFFICE, P.A.			
·	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d a check for:	
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status	
FROM: ALI	CIA R. SEWARD Name	e (Printed or typed)		
Po	ist Office Box	3554 Address		
Riverview, Florida 33568 City, State & Zip				
813	-454-7788			
	Daytime Telephone number			
a.re	gina.seward@gmail.com E-mail address: (to be used	d for future annual report	notification)	

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

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

<u>ARTICLE II PRIN</u>	ICIPAL OFFICE Principal street address	I	Mailing addre	ess, if different is	:
12508 Burgess Hill D	rive	P.O. Box	P.O. Box 3554		
Riverview, Florida 33579		Riverviev	Riverview, Florida 33568		
	POSE I the corporation is organized is:		Legal	Servic	cs.
				<u> </u>	A
· · · · · · · · · · · · · · · · · · ·					
The number of shares of	RES of stock is:/ IAL OFFICERS AND/OR DIRECTO				3 PM 3: 46
The number of shares of	of stock is:/ IAL OFFICERS ANDIOR DIRECTO Alicia R. Seward tle:	<u>28</u>	·		3: 46
The number of shares of sh	of stock is:/ IAL OFFICERS AND/OR DIRECTO Alicia R. Seward tle: P.O. Box 3554	<u>28</u>			3: 46
The number of shares of sh	of stock is:/ IAL OFFICERS AND/OR DIRECTO Alicia R. Seward tle: P.O. Box 3554	<u>RS</u> Name and Title			3: 46
The number of shares of ARTICLE V INIT	of stock is:/ IAL OFFICERS AND/OR DIRECTO Alicia R. Seward tle: P.O. Box 3554	Name and Title: Address:			3: 46
The number of shares of ARTICLE V INIT	Alicia R. Seward tle: P.O. Box 3554 Riverview, Florida 33568	Name and Title: Address: Name and Title: Address: Address:			3: 46
The number of shares of ARTICLE V INIT Name and Ti Address Name and Tit Address	Alicia R. Seward tle: P.O. Box 3554 Riverview, Florida 33568	Name and Title: Address: Name and Title: Address: Address:			3: 46
Name and Ti Address Name and Tit Address	Alicia R. Seward tle: P.O. Box 3554 Riverview, Florida 33568	Name and Title: Address: Name and Title: Address: Address:			3: 46

Name a	nd Title:	Name and Title:
Addres	ss	Address:
	•	
	REGISTERED AGENT	
The name and	Florida street address (P.O. Box NOT acceptal	ble) of the registered agent is:
Name:	Donald W. Seward	
Address:	576 First Avenue North	
	St. Petersburg, Florida 33701	
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The name and a	address of the Incorporator is:	
Name:	Alicia R. Seward	
Address:	P.O. Box 3554	
	Riverview, Florida 33568	 _
		
ARTICLE VIII	EFFECTIVE DATE:	
Effective date, i	f other than the date of filing:	(OPTIONAL)
(If an effective days after the i		annot be more than five business days prior or 90 business
-	-	the same of the control of the day of the same than the
	effective date on the Department of State's rec	cable statutory filing requirements, this date will not be listed as ords.
	•	
		rocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		7/10/15
	Required Signature/Registered Agen	t ! Date
	ocument and affirm that the facts stated herein Department of State constitutes a third degree	n are true. I am aware that the false information submitted in a felony as provided for in s.817.155. F.S.
	OLA CHA CX	TINIC
W Redi	uited Signature/Incorporator	
		, 200



FLORIDA DEPARTMENT OF STATE June 17, 2015

ALICIA R. SEWARD PO BOX 3554 RIVERVIEW, FL 33568

RECEIVED JUL 1 3 2015

SUBJECT: SEWARD LAW OFFICE, P.A.

Long a boutte

Ref. Number: W15000042070

We have received your document for SEWARD LAW OFFICE, 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 Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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.

Christine Haney Regulatory Specialist II New Filing Section

Letter Number: 215A00012775