P15000087294

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
	WAIT	<u></u>		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
W15- (6765 3			

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SECHETARY OF STATE

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H

COVER LETTER

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

SUBJECT: Cel	lini Law Firm, P.A.				
30BJEC1	(PROPOSED CORPO	PRATE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an	original and one (1) copy of the	articles of incorporation and	d a check for:		
■ \$70.0 Filing Fo		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	e e e	ADDITIONAL CO			
FROM		ame (Printed or typed)			
	8038 Lakepointe Ct				
	Address				
	Plantation, FL 33322				
	C	ity, State & Zip			
	954 804 0208				
	Daytim gcellini@gmail.com	ne Telephone number			
		used for future annual report	notification)		

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



October 13, 2015

GIANCARLOS R. CELLINI 8038 LAKEPOINTE CT PLANTATION, FL 33322

SUBJECT: CELLINI LAW FIRM, P.A.

Ref. Number: W15000067653

We have received your document for CELLINI LAW FIRM, 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.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 915A00021607



ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (P#5:0CT 21 PM 1: 50)

ARTICLE I NAME The name of the corpora	Cellini Law Firm, I	P.A.	SECRETARY OF STATE
	CIPAL OFFICE Principal street address		Mailing address, if different is:
8038 Lakepointe Ct.			
Plantation, FL 33322			
	<u>OSE</u> the corporation is organized is: _ spects of the practice of law	The purpose for which Cellini	Law Firm, P.A. is incorporated is to
ARTICLE IV SHARD The number of shares of ARTICLE V INITIA Name and Title	stock is: (L. OFFICERS AND/OR DIRECTION OF CALLINIA DE CALLINIA D		
Address	8038 Lakepointe Ct.	Address:	_
	Plantation, FL 33322		
			
Name and Title		Name and Title:	
Address		Address:	
Name and Title:		Name and Title:	
Address		Address:	
			



15 OCT 21 PM 1: 50

Name	and Title:	Name and Title:	
Addre	ess	Address:	SECRETARY OF STATE
			At Heiser A result in
			
	· · · · · · · · · · · · · · · · · · ·		
	REGISTERED AGENT Florida street address (P.O. Box NOT accepta	able) of the registered agent is:	
Name:	Giancarlo R. Cellini	, ,	
Address:	8038 Lakepointe Ct.		
	Plantation, FL 33322		
	-		
ARTICLE VII	<u>INCORPORATOR</u>		
The name and	address of the Incorporator is:		
Name:	Giancarlo R. Cellini		
Address:	8038 Lakepointe Ct.		
	Plantation, FL 33322		
	I EFFECTIVE DATE: September 30, 2	2015 . (OPTION	ΔΙ)
(If an effective days after the	date is listed, the date must be specific and	cannot be more than five bus	iness days prior or 90 business
-	-		
Note: If the da the document's	te inserted in this block does not meet the appl effective date on the Department of State's rec	icable statutory filing requirem cords.	ents, this date will not be listed as
Having been no this certificate,	amed as registered agent to accept service of p I am familian with and accept the appointment	process for the above stated con t as registered agent and agree	poration at the place designated in to to act in this capacity
	What I want to the same of the	_	October 16, 2015
	Required Signature/Registered Ager	nt	Date
I submit this de	ocument and affirm that the facts stated herei	in are true. I am aware that th	ne false information submitted in a
document to the	e Department of State constitutes a third degree	e felony as provided for in s.81	7.155, F.S.
	- Hh		October <u>16</u> , 2015
Req	uired/Signature/Incorporator	- Madrid	Date