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COVER LETTER

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

SUBJECT: R. Charles Minardi, 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: R. Charles Minardi

Name (Printed or typed)

4851 W. Gandy Blvd., B4, L21

Address

Tampa, Florida 33611

City, State & Zip

813-286-7108

Daytime Telephone number

RMINARDI2@TAMPABAY.RR.COM

E-mail address: (to be used 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)

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ARTICLE I NAME

The name of the corporation shall be: R. Charles Minardi, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4851 W. Gandy Blvd., B4, L21

Tampa, Florida 33611

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is organized as a Professional Service Corporation

as permitted under Florida Ststutes and the Corporation will be engaged in every aspect of the general practice of law. The

professional services involved in this Corporation's practice of law may be rendered only through its officers, agents and

employees who are duly authorized and licensed to practice law under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: R. Charles Minardi, President

Name and Title: _____

Address 4851 W. Gandy Blvd., B4, L21

Address: _____

Tampa, Florida 33611

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: R. Charles Minardi
Address: 4851 W. Gandy Blvd., B4, L21
Tampa, Florida 33611

ARTICLE VII INCORPORATOR

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

Name: R. Charles Minardi
Address: 4851 W. Gandy Blvd., B4, L21
Tampa, Florida 33611

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: October 25, 2015. (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

R. Charles Minardi
Required Signature/Registered Agent

10-28-15
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.

R. Charles Minardi
Required Signature/Incorporator

10-28-15
Date