

P15000095162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900279072049

11/16/15--01003--007 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 NOV 16 PM 3:23

APPROVED  
AND  
FILED

11/16

## COVER LETTER

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

**SUBJECT:** Taylor A. Richardson, PA

(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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Taylor Richardson

\_\_\_\_\_  
Name (Printed or typed)

4600 NE 1st Avenue #1

\_\_\_\_\_  
Address

Miami, FL 33137

\_\_\_\_\_  
City, State & Zip

305.905.5502

\_\_\_\_\_  
Daytime Telephone number

taylor@eloyc.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)

APPROVED  
AND  
FILED

**ARTICLE I NAME**

The name of the corporation shall be: Taylor A. Richardson, PA

15 NOV 16 PM 3:28

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4600 NE 1st Avenue #1

1451 Ocean Drive #104

Miami, FL 33137

Miami Beach, FL 33139

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Realtor Associate with Douglas Elliman.

**ARTICLE IV SHARES**

The number of shares of stock is: one

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Taylor Richardson

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

Address 4600 NE 1st Avenue #1

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

Miami, FL 33137

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

APPROVED  
AND  
FILED

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

15 NOV 16 PM 3:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Taylor Richardson  
Address: 4600 NE 1st Avenue #1  
Miami, FL 33137

**ARTICLE VII INCORPORATOR**

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

Name: Taylor Richardson  
Address: 4600 NE 1st Avenue #1  
Miami, FL 33137

**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*

*T Rich*

11.13.2015

Required Signature/Registered Agent

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.*

*T Rich*

11.13.2015

Required Signature/Incorporator

Date