

P160000000854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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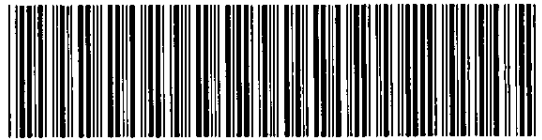
(Business Entity Name)

(Document Number)

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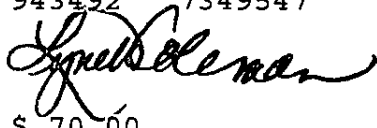
T SCHROEDER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 943492 7349547

AUTHORIZATION :



COST LIMIT : \$ 70.00

ORDER DATE : January 5, 2016

ORDER TIME : 9:40 AM

ORDER NO. : 943492-005

CUSTOMER NO: 7349547

DOMESTIC FILING

NAME: K.C. BOUCHILLON, P.A.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS: _____

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: K.C. Bouchillon, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

480 S. Broadway Ave.

P. O. Box 1279

Bartow, Florida 33830

Bartow, Florida 33831-1279

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: law office

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: K.C. Bouchillon, P, VP, T., S.

Name and Title: _____

Address 480 S. Broadway Ave.

Address: _____

Bartow, Florida 33830

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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STATE
CLERK

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: K. C. Bouchillon, Esquire
Address: 480 S. Broadway Ave.
Bartow, Florida 33830

ARTICLE VII INCORPORATOR

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

Name: K.C. Bouchillon
Address: 480 S. Broadway Ave.
Bartow, Florida 33830

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

K.C. Bouchillon
Required Signature/Registered Agent

1/5/2016
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.

K.C. Bouchillon
Required Signature/Incorporator

1/5/2016
Date

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