

P16000016735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

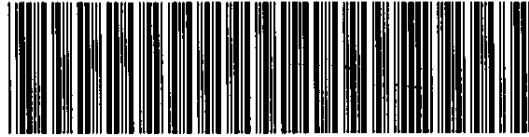
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900282224629

02/16/16--01027--015 **70.00

16 FEB 16 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1/14

COVER LETTER

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

SUBJECT: THE LAW OFFICE OF CHEYENNE WHITFIELD, 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 ☐ \$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: Cheyenne Whitfield

Name (Printed or typed)

10216 Tarragon Drive

Address

Riverview, FL 33569

City, State & Zip

(813) 230-3359

Daytime Telephone number

cwhitfieldesquire@gmail.com

E-mail address: (to be used for future annual report notification)

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

APPROVED
AND
FILED

ARTICLES OF INCORPORATION

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

16 FEB 16 PM 2:34

ARTICLE I NAME

The name of the corporation shall be: THE LAW OFFICE OF CHEYENNE WHITFIELD, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
10216 TARRAGON DRIVE, RIVERVIEW FL 33569

SECRETARY OF STATE
TALLAHASSEE FLORIDA
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LEGAL SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CHEYENNE WHITFIELD - P Name and Title: _____

Address 10216 TARRAGON DIRVE Address: _____
RIVERVIEW, FL 33569

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

APPROVED
AND
FILED

16 FEB 16 PM 2:34

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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: Cheyenne Whitfield
Address: 10216 Tarragon Drive
Riverview, FL 33569

ARTICLE VII INCORPORATOR

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

Name: P Cheyenne Whitfield
Address: 10216 Tarragon Drive
Riverivew, FI 33569


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 2/8/16 (OPTIONAL)

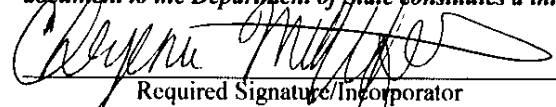
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

 _____
Required Signature/Registered Agent Date 2/8/16

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.

 _____
Required Signature/Incorporator Date 2/8/16