

P/6000034207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

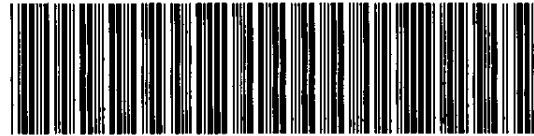
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APR 1 2016

S. GILBERT

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## COVER LETTER

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

SUBJECT: LORI AVERBACH COTTONE, 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: LORI A. COTTONE

Name (Printed or typed)

13040 SW 30<sup>th</sup> COURT

Address

DAVIE, FL 33330

City, State & Zip

954-240-5811

Daytime Telephone number

LAC@COTTONE-LAW.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)

ARTICLE I NAME

The name of the corporation shall be: LORI AVERBACH COTTONE, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address  
13040 SW 30th Court  
DAVIE, FL 33330

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The Corporation is being  
formed for the practice of law and all  
other activities permitted under  
applicable law.

ARTICLE IV SHARES

The number of shares of stock is: 2,000 shares of common stock, par  
value \$.01 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LORI A. COTTONE Director Name and Title: \_\_\_\_\_

Address 13040 SW 30th Court Address: \_\_\_\_\_  
DAVIE, FL 33330

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: LORI A. COTTON  
Address: 13040 SW 30th Court  
DAVIE, FL 33330

**ARTICLE VII INCORPORATOR**

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

Name: LORI A. COTTON  
Address: 13040 SW 30th Court  
DAVIE, FL 33330

**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*

  
Required Signature/Registered Agent

4/6/16  
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.*

  
Required Signature/Incorporator

4/6/16  
Date