

P16000042730

(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



000285539980

05/10/16--01019--004 **78.75

FILED

16 MAY 13 PM 1:09

RECEIVED

5/18/14

COVER LETTER

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

SUBJECT: DANIELA A. GORDON, 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: Daniela A. Gordon
Name (Printed or typed)
1280 S. Alhambra Circle, #2309
Address
Coral Gables, FL 33146
City, State & Zip
305.542.3503
Daytime Telephone number
DanielaAGordon@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
16 MAY 10 PM 1:09

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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

DANIELA A. GORDON, P.A.

16 MAY 10 PM 1:09

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1280 S. ALHAMBRA CIR., #2309

CORAL GABLES, FL 33146

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The practice of law.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DANIELA A. GORDON, P

Name and Title:

Address

1280 S. Alhambra Cir.
#2309

Address:

Coral Gables, FL 33146

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: Robert Sheres, Esq.

Address: 1800 N. Military Trail, #470
Boca Raton, FL 33431

ARTICLE VII INCORPORATOR

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

Name: Daniela Gordon

Address: 1280 S. Alhambra Circle, #2309
Coral Gables, FL 33146


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

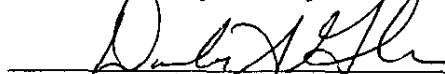


Required Signature/Registered Agent

5/6/16

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

5.5.16

Date

FILED
16 MAY 10 PM 1:00
MAY 10 2016
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE SEVENTH JUDICIAL CIRCUIT
PALM BEACH COUNTY, FLORIDA