

P 16000054240

(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



000287093270

06/20/16--01022--013 **78.75

FILED
16 JUN 23 PM 3:03
RECEIVED
JUL 1 2016

6/28/14

COVER LETTER

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

SUBJECT: LOW Offices of Paul Agbeyege, 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:

Paul Agbeyege Esq.
Name (Printed or typed)

19084 NE 29th Ave Ste 101
Address

Aventura, FL 33180
City, State & Zip

(786) 708-7349
Daytime Telephone number

Paul.agbeyege@gmail.com
E-mail address: (to be used for future annual report notification)

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

FILED
16 JUN 20 PM 3:03

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: Law Offices of Paul Fabeyske, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

19084 NE 29th Ave Ste 101
Aventura, FL 33180

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide quality legal services to the general public.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Paul Fabeyske, President Name and Title: _____

Address 19084 NE 29th Ave Address: _____
Ste 101
Aventura, FL 33180

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
JUN 20 PM 3:03
CLERK OF DISTRICT COURT
JULY 11 2003

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: Paul Akoyegbe

Address: 19084 NE 29th Ave Ste 101
Aventura, FL 33180

ARTICLE VII INCORPORATOR

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

Name: Paul Akoyegbe

Address: 19084 NE 29th Ave Ste 101
Aventura, FL 33180

FILED
16 JUN 20 PM 3:03
ALABAMA DEPARTMENT OF STATE

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

Paul Akoyegbe
Required Signature/Registered Agent

6/15/16
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.

Paul Akoyegbe
Required Signature/Incorporator

6/15/16
Date