

P16000069328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

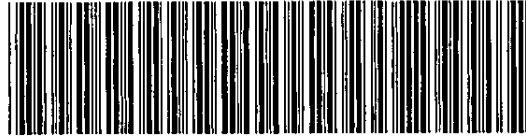
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W1600046239

AUG 23 2016

T. SCOTT



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FILING OFFICE  
OF THE  
STATE OF CALIFORNIA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 30, 2016

BRIAN R. GOLDSTEIN  
255 UNIVERSITY DRIVE  
CORAL GABLES, FL 33144

SUBJECT: GOLDSTEIN LAW OFFICE, P.A.  
Ref. Number: W16000046239

We have received your document for GOLDSTEIN LAW OFFICE, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott  
Regulatory Specialist II  
New Filings Section

Letter Number: 316A00013808

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FLORIDA

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: Goldstein Law Office, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

255 University Drive  
Coral Gables, Fl 33134

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any purpose permitted in the State of Florida

The Practice of LAW AND ANY ACTIVITY  
NECESSARY TO SUPPORT THE PRACTICE OF  
LAW

**ARTICLE IV SHARES**

The number of shares of stock is: 500

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Brian R. Goldstein, Pres Name and Title: \_\_\_\_\_

Address: 255 University Drive Address: \_\_\_\_\_  
Coral Gables, Fl 33144

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:

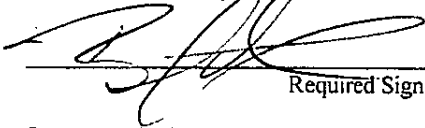
Name: Brian R. Goldstein  
Address: 255 University Drive  
Coral Gables, Fl 33144

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Brian R. Goldstein  
Address: 255 University Drive  
Coral Gables, Fl 33144

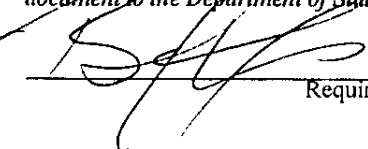
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Required Signature/Registered Agent

6/20/16  
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

6/20/16  
Date

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