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15 SEP 16 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T HENDERSON

SEP 20 2016

W16-064/93



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 16, 2016

ANTONIO PRIETO  
3705 N. HIMES AVE.  
TAMPA, FL 33607

SUBJECT: ANTONIO P. PRIETO, P.A.  
Ref. Number: W16000064193

We have received your document for ANTONIO P. PRIETO, P.A. and your check(s) totaling \$78.75. 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.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 316A00019880

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## COVER LETTER

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

**SUBJECT:** Antonio P. Prieto, 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:** Antonio P. Prieto

Name (Printed or typed)

3705 North Himes Avenue

Address

Tampa, Florida, 33607

City, State & Zip

813-8778600

Daytime Telephone number

lawprieto@hotmail.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: Antonio P. Prieto, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3705 North Himes Avenue

Tampa, Florida, 33607

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: For any and all lawful purposes. 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: Antonio P. Prieto, President & Director

Name and Title: \_\_\_\_\_

Address 3705 North Himes Avenue

Address: \_\_\_\_\_

Tampa, Florida, 33607

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

SEP 14 1996  
16 SEP 14 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Antonio P. Prieto  
Address: 3705 North Himes, Avenue  
Tampa, Florida, 33607

**ARTICLE VII INCORPORATOR**

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

Name: Antonio P. Prieto  
Address: 3705 North Himes Avenue  
Tampa, Florida, 33607

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**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*

*Antonio P. Prieto*

Required Signature/Registered Agent

09/08/2016

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.*

*Antonio P. Prieto*

Required Signature/Incorporator

09/08/2016

Date