

P16000083805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

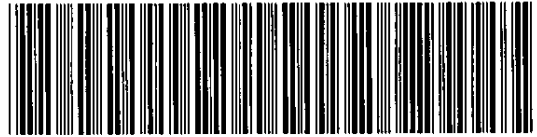
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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10/17/16--01046--016 **87.50

FILED
2016 OCT 17 PM 3:59
CLERK OF STATE
TALLAHASSEE, FLORIDA

V HERRING
OCT 18 2016

COVER LETTER

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

SUBJECT: Ryan DeVore PA

(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: Ryan DeVore

Name (Printed or typed)

8194 NW 6th Street

Address

Coral Springs, FL 33071

City, State & Zip

954-675-9843

Daytime Telephone number

ryanpdevore@gmail.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)

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ARTICLE I NAME

The name of the corporation shall be: Ryan DeVore PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

Ryan DeVore PA

8194 NW 6th Street

Coral Springs, FL 33071

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Sales for Profit

ARTICLE IV SHARES

The number of shares of stock is: 100 (one hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ryan DeVore Name and Title: _____

Address 8194 NW 6th Street Address: _____

Coral Springs, FL 33071 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
2016 OCT 17 PM 3:59
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: Ryan DeVore
Address: 8194 NW 6th Street
Coral Springs, FL 33071

ARTICLE VII INCORPORATOR

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

Name: Ryan DeVore
Address: 8194 NW 6th Street
Coral Springs, FL 33071

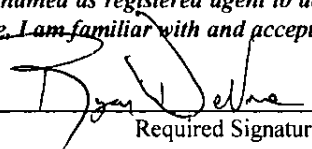
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09-29-16 (OPTIONAL)

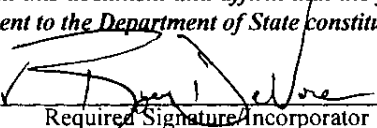
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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
✓ 10/14/16
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
✓ 10/14/16
Date