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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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SECKETARY OF SIMIE
JIVISION OF CORPORDATIONS

JOYISTON OF CORPORDATIONS

EFFECTIVE DATE 16/30/16

7 1/09/16

COVER LETTER

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

SUBJECT: Chi	ristopher Horton P.A.		
	(PROPOSED CORPO	PRATE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an	original and one (1) copy of the	articles of incorporation and	d a check for:
☐ \$70.0 Filing Fo	·	■ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO)PY REQUIRED
FROM:		ame (Printed or typed)	
	11716 Kierkel Lane	Add	
٠	Seminole, FL 33772	Address	
	C	ity. State & Zip	
	727-793-8064		
	Daytim	e Telephone number	
	chorton682@hotmail.com		
	F-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 corpora	Christopher Horton P.A.		
ARTICLE II PRING		Mailing a	address, if different is:
Seminole, FL 33772			
ARTICLE III PURP. The purpose for which	OSE the corporation is organized is:	state	
			== <u>~</u>
			W 0F 70
			<u> </u>
			2: 35 5 5 5 5 5 5 5 5 5
	4L OFFICERS AND/OR DIRECTOR:		
Address	11716 Kierkel Lane	Address:	
	Seminole, FL 33772		
Name and Title	::	Name and Title:	
Address		Address:	
N. Levis			
Name and Title Address			
. 144, 555			

Name ar	nd Title:	Name and Title:	
Addres	s	Address:	
	REGISTERED AGENT Florida street address (P.O. Box NOT ac	contable) of the registered agent is:	
Name:	Christopher Horton	septable) of the registered agent is.	
Address;	11716 Kierkel Lane		
	Seminole, FL 33772	SECA	
ARTICLE VII	<u>INCORPORATOR</u>	SECRETARY 01 2016 NOV -4 P	=
The name and a	ddress of the Incorporator is:	P	C
Name:	Christopher Horton	?:	
Address:	11716 Kierkel Lane	ੱ ਰ ਲੁੱਜ	
	Seminole, FL 33772		
Effective date, i		. (OPTIONAL) and cannot be more than five business days prior or 90 business	
Note: If the dat the document's	e inserted in this block does not meet the effective date on the Department of State	applicable statutory filing requirements, this date will not be listed as s records.	
Having been na this certificate, I	med as registered agent to accept service amfanglar with and accept the appoint	of process for the above stated corporation at the place designated in the pl	7
****	Required Signature/Registered	Agent Date	
I submit this do document to the	cument and uffirm that the fucts stated Department of State constitutes a third of	herein are true. I am aware that the false information submitted in egree felony as provided for in s.817.155, F.S.	7
1	///H///	10.30.16	
Req	aired dignature/Incorporator	Date	