

PI6000097620

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(Business Entity Name)

(Document Number)

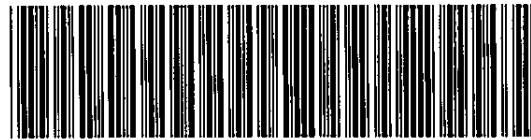
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TALLAHASSEE, FLORIDA

December 2, 2016

16 DEC 12 03:10:07

FLORIDA  
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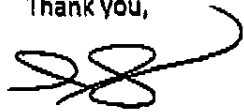
Nadira D McClees-Sams  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Letter #416A00024694, Ref Number: W16000077738

Nadira,

I do not wish to reinstate Ivan J. Gould, PA under document number P15000014793. Please see the attached rejection letter for new filing as reference.

Thank you,



Ivan J. Gould, PA

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**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

**FILED**  
**16 NOV 15 PM 4:05**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

November 17, 2016

**IVAN J GOULD**  
**1609 RIDGEWOOD LANE**  
**SARASOTA, FL 34231**

**SUBJECT: IVAN J GOULD, PA**  
**Ref. Number: W16000077738**

We have received your document for IVAN J GOULD, PA 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation.

One or more major words may be added to make the name distinguishable.

P15000014793

Please return 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) 245-8052.

**Nadira D McClees-Sams**  
**Regulatory Specialist II**

**Letter Number: 416A00024694**

## COVER LETTER

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

**SUBJECT:** IVAN J GOULD, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** IVAN J GOULD  
\_\_\_\_\_  
Name (Printed or typed)

1609 RIDGEWOOD LANE  
\_\_\_\_\_  
Address

SARASOTA, FL 34231  
\_\_\_\_\_  
City, State & Zip

941-954-5454  
\_\_\_\_\_  
Daytime Telephone number

IVANGOULD@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: IVAN J GOULD, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address  
1609 RIDGEWOOD LANE  
SARASOTA, FL 34231

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TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE PROFESSIONAL

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: IVAN J GOULD, PRES Name and Title:

Address 1609 RIDGEWOOD LANE Address:

SARASOTA, FL 34231

Name and Title: Name and Title:

Address Address:

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: IVAN J GOULD  
Address: 1609 RIDGEWOOD LANE  
SARASOTA, FL 34231

**ARTICLE VII INCORPORATOR**

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

Name: IVAN J GOULD  
Address: 1609 RIDGEWOOD LANE  
SARASOTA, FL 34231

**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*

\_\_\_\_\_  
Required Signature/Registered Agent

11/8/16  
\_\_\_\_\_  
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

11/8/16  
\_\_\_\_\_  
Date