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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. MOON
DEC 21 2016

December 20, 2016

Florida Department of State
Division of Corporations Corporate Filings
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**RE: Muirhead, Gaylor, Steves & Waskom, P.A.
Document # V13949**

To Whom It May Concern:

I, William E Gaylor III, as Manager and Sole Shareholder and Director of the above referenced entity, hereby give permission for a new Entity being formed to use the name Muirhead, Gaylor, Steves & Waskom, P.A. of which I will be one of two shareholders as well as President. My company is undergoing alterations in its practice and the name of this company will be re-named soon but due to timing concerns, we would like to set up this new entity now.

Sincerely,



William E Gaylor III
Shareholder & Director
Muirhead, Gaylor, Steves & Waskom, P.A.

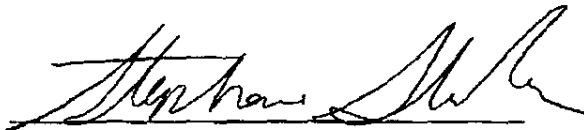
State of Florida)
County of Sarasota)

Acknowledged and subscribed before me by William E Gaylor III, who is personally ✓
known to me or who has produced Florida Drivers License # _____ as identification,

Given under my hand and seal of office, on the 22 day of December,
2016.



STEPHANIE SHAMBORA
MY COMMISSION # EE 847754
EXPIRES: January 6, 2017
Bonded Thru Budget Notary Services



Notary Public, State of Florida

COVER LETTER

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

SUBJECT: Muirhead, Gaylor Steves & Waskom, 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: Law Offices of Marc J. Miles, P.A.

Name (Printed or typed)

101 W. Venice Ave, Suite 37

Address

Venice, FL 34285

City, State & Zip

941-484-8280

Daytime Telephone number

mmiles@marcmileslaw.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: Muirhead, Gaylor Steves & Waskom, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

901 Ridgewood Ave.

Venice, FL 34285

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Practice of Law

ARTICLE IV SHARES

The number of shares of stock is: 100

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William E. Gaylor III, P/T

Name and Title: _____

Address 5171 Oxford Drive

Address: _____

Sarasota, FL 34242

Name and Title: Elsbeth G. Waskom, VP/S

Name and Title: _____

Address 5897 Carriage Drive

Address: _____

Sarasota, FL 34243

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: William E. Gaylor III
Address: 901 Ridgewood Ave.
Venice, FL 34285

ARTICLE VII INCORPORATOR

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

Name: William E. Gaylor III
Address: 901 Ridgewood Ave.
Venice, FL 34285

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TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: December 15, 2016. (OPTIONAL)

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

W E Gaylor III
Required Signature/Registered Agent

SIGN HERE

12/20/2016

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.

W E Gaylor III
Required Signature/Incorporator

SIGN HERE

12/20/2016

Date