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CHETARY OF STATE

LYOURSSER, FLORID.

## **COVER LETTER**

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

SUBJECT: Ful	z, P.A.			
	(PROPOS	SED CORPORAT	E NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an	original and one (1)	copy of the artic	les of incorporation and	d a check for:
\$70.00 Filing Fee	90 \$78.75 be Filing Fee & Certificate	of Status	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
			ADDITIONAL CO	PY REQUIRED
FROM:	Karen D. Fultz, Esquire		Printed or typed)	
	19225 Pepper Grass Dri			
	Tampa, Florida 33647	A	ldress	
		City, S	tate & Zip	
	6787778447			
	***	Daytime Te	ephone number	
	kdfultz2@msn.com			
	E-mail add	ress: (to be used	for future annual report i	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	tion shall be:		
ARTICLE II PRINC		Mailing address	, if different is:
19225 Pepper Grass Dr	ive		
Tampa, Florida 33647			
ARTICLE III PURPO The purpose for which t	OSE a Profres he corporation is organized is:	sional Corporation to operate as a lav	v firm to provide legal se
			17 30 P
ARTICLE IV SHAR. The number of shares of	stock is:		ASSEELE LE
Name and Title	AL OFFICERS AND/OR DIRECTORS  Karen D. Fultz, CEO	Name and Title	ALE BBA
Address	19225 Penner Grass Drive	Name and Title:  Address:	
Mulcas	Tampa, Florida 33647	Auditss.	-
Nama and Titla		Nome and Title.	
Address			
Address			
Name and Title	:		
Address		Address:	
			· · · · · · ·

Name a	nd Title:	Name and Title:	
Addres	es	Address:	
<u>ARTICLE VI</u>	REGISTERED AGENT		
The <u>name and I</u> Name:	Florida street address (P.O. Box NOT accepta Karen D. Fultz	ble) of the registered agent is:	
Address:	19225 Pepper Grass Drive		
Address.	Tampa, Florida 33647		
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The name and a	address of the Incorporator is:		
Name:	Karen D. Fultz		
Address:	19225 Pepper Grass Drive		
	Tampa, Florida 33647		
Effective date, i (If an effective filing.)  Note: If the date	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific and e inserted in this block does not meet the applieffective date on the Department of State's rec	cannot be more than five days cable statutory filing requireme	s prior or 90 days after the
	med as registered agent to accept service of p cam familiar with and accept the appointment		
- //	Required Signature/Registered Ager	> -	Date
I submit this do document to the	cumen) and affirm that the facts stated herei Department of State constitutes a third degree	n are true. I am aware that the felony as provided for in s.817	e false information submitted in .155, F.S.
	1111		41617
	aired Signature Incorporator	>	

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