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17 MAY 26 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/30/17

COVER LETTER

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

SUBJECT: Heuler Law Firm, Inc.

(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: Victoria E. Heuler
Name (Printed or typed)

1677 Mahan Center Blvd.
Address

Tallahassee, FL 32308
City, State & Zip

850-421-2400
Daytime Telephone number

victoria@hwelderlaw.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: HEULER LAW FIRM, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1677 Mahan Center Blvd.

Tallahassee, Florida 32308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: providing Elder Law legal services

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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Victoria E. Heuler, President

Name and Title: _____

Address 1677 Mahan Center Blvd.

Address: _____

Tallahassee, FL 32308

Name and Title: Victoria E. Heuler, Secretary

Name and Title: _____

Address 1677 Mahan Center Blvd.

Address: _____

Tallahassee, FL 32308

Name and Title: Victoria E. Heuler, Treasurer

Name and Title: _____

Address 1677 Mahan Center Blvd.

Address: _____

Tallahassee, FL 32308

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: Victoria E. Heuler
Address: 1677 Mahan Center Blvd.
Tallahassee, Florida 32308

ARTICLE VII INCORPORATOR

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

Name: Victoria E. Heuler
Address: 1677 Mahan Center Blvd.
Tallahassee, Florida 32308

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

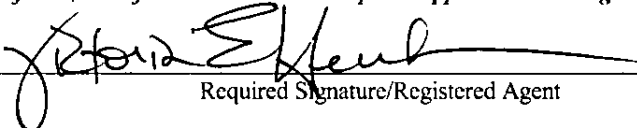
ARTICLE VIII EFFECTIVE DATE:

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 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


Required Signature/Registered Agent

5/22/17
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

5/22/17
Date