

P17000060385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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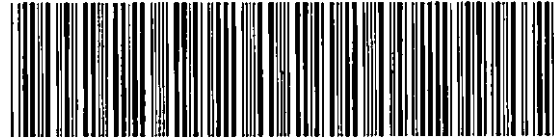
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA

07/17/17

COVER LETTER

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

SUBJECT: SAMANTHA L. LIST 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 ☒ \$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: SAMANTHA L LIST
Name (Printed or typed)

3365 SW 2ND COURT
Address

DEERFIELD BEACH, FL 33442
City, State & Zip

(561) 445-3101
Daytime Telephone number

sam@bocahome.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: SAMANTHA L. LIST P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3365 SW 2ND COURT

DEERFIELD BEACH, FL 33442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL ACTIVITIES RELATED TO THE LISTING, RENTING, AND SALES
OF REAL ESTATE, INCLUDING MANAGEMENT, SUPERVISION AND
PROVIDING REAL ESTATE RELATED ACTIVITIES.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P, Director, President

Name and Title: _____

Address

3365 SW 2ND COURT

Address: _____

DEERFIELD BEACH, FL 33442

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

NOTED
17 JUL 14 AM 10:15
STATE
FLORIDA

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: SAMANTHA L. LIST _____

Address: 3365 SW 2ND COURT _____

DEERFIELD BEACH, FL 33442 _____

ARTICLE VII INCORPORATOR

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

Name: SAMANTHA L. LIST _____

Address: 3365 SW 2ND COURT _____

DEERFIELD BEACH, FL 33442 _____

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CLERK OF STATE
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

7/10/17
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

7/10/17
Date