

P/17000062591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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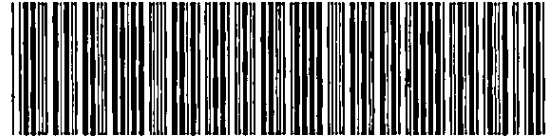
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE
OF
FLORIDA

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07/25/17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 12, 2017

JAMES C. HOFFMAN
12466 QUERCUS LN.
WELLINGTON, FL 33414

SUBJECT: JAMES CHRISTOPHER HOFFMAN P.A.
Ref. Number: W17000057325

We have received your document for JAMES CHRISTOPHER HOFFMAN P.A. 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 417A00014022

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CORPORATIONS
COMMERCIAL
REGISTRATION SERVICES

COVER LETTER

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

SUBJECT: JAMES CHRISTOPHER HOFFMAN 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: JAMES CHRISTOPHER HOFFMAN
Name (Printed or typed)

12466 QUERCUS LANE
Address

WELLINGTON, FL 33414
City, State & Zip

561-282-8937
Daytime Telephone number

gojameshoffman@gmail.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: JAMES CHRISTOPHER HOFFMAN P. A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12466 Quercus LN
Wellington, FL 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate SERVICES
"ALL BUSINESS THAT IS LAWFUL"

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FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES HOFFMAN

BROKER | President

Address 12466 Quercus LN Address:

Wellington, FL 33414

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: James Hoffman
Address: 12466 Quercus LN
Wellington, FL 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James Hoffman
Address: 12466 Quercus LN
Wellington, FL 33414

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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

James Christopher Hoffman
Required Signature/Registered Agent

3-15-17
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.

James Christopher Hoffman
Required Signature/Incorporator

3-15-17
Date