P17000074991

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100303308481

09/07/17--01015--005 **70.00

17 SEP -7 PH 2: 23

T 09/14/17

COVER LETTER

Department of State New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

SUBJECT: Justin Schultz, 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:

<u>X</u>\$70.00

_\$78.75 Filing Fee

\$78.75

\$87.50

Filing Fee

& Certificate of Status

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate of Status

FROM:

Justin Schultz

Name (Printed or typed)

8866 Abbott Ave.

Address

Surfside, FL 33154 City, State & Zip

786-999-9905

Daytime telephone number

justin@gadinsky.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 1	NAME				
The name of the	corporation shall be: <u>Justin</u>	Schultz, P.A.			
4 D THAN 11 14	DDIVED ALACTECE				
ARTICLE II	PRINCIPAL OFFICE	Mailing addrage if different			
Principal street a		Mailing address, if different:			
8866 Abbott Ave		<u>N/A</u>			
Surfside, FL 331	<u>54</u>				
ARTICLE III	<u>PURPOSE</u>				
		anized is: Provide real estate brokerage services			
ARTICLE IV	SHARES				
	nares of stock is: 100				
THE HUMBER OF SE	111 10 1 3 10 1 1 1 1 1 1 1 1 1 1 1 1 1				
ARTICLE V	INITIAL OFFICERS AN	DON DIRECTORS			
Name and Title:	Justin Schultz, President				
Address:	8866 Abbott Avenue				
	Surfside, FL 33154		<u></u>		
				:/:	
ARTICLE VI	REGISTERED AGENT		=:	(<u>f</u>)	
		. Box not acceptable) of the registered agent is:		i	_
Name:	Justin Schultz, President				-
Address:	8866 Abbott Avenue		•	σ	-
	Surfside, FL 33154		r .		
	441214 B B A B A B A B		TALL ART SEE STAILE	\sim	
	<u>INCORPORATOR</u>		类色	\sim	
	ddress of the Incorporator i	S:	``		
Name:	Justin Schultz, President				
Address:	8866 Abbott Avenue				
	Surfside, FL 33154				
ARTICLE VIII	EFFECTIVE DATE				
	f other than the date of filing	g:			
		t be specific and cannot be more than five business	days p	rior or	r 9(
business days af		•	• •		
		not meet the applicable statutory filing requirements.	this dat	e will i	not
be listed as the d	ocument's effective date on	the Department of State's records.			
				41	
		iccept service of process for the above stated corpor, with and accept the appointment as registered agen.			
in this capacity	s cernjicaie, i am jaminar	<i>wan ana ассері іне арранітені ах гедімегеа аден.</i>	r ana ag	ree to	acı
in inis capacity					
///	-	, 1			
4		9/1/17			
Required Signatu	re/Registered Agent	Date	_		
1	G + 11 G - 11				

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,

Required Signature/Incorporator