P17000094073

(Re	questor's Name)	
(Ad	dress)	
		-
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500305815945

11/28/17--01009--029 **70.00



NOV 2 7 2017

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				
SUBJECT: The Peter of PROPOSED CORPORATE	FE 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 & Certificate of Status	□ \$78.75 □ \$87.50 Filing Fee Filing Fee, & Certified Copy Certificate Of Status ADDITIONAL COPY REQUIRED			
FROM: And Ten Peter 5 Name (Printed or typed) Co30 Adams Gtreet, Suite 706				
Jackson Ville, Flotidy 33204 City, State & Zip Daytime Telephone number				
E-mail address: (to be used for future airmal 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 corporat	ion shall be: The Pete	.T4 H	irm,	P.A.
ARTICLE II PRINC	IPAL OFFICE Principal street address	М	ailing address, if	different is:
630 Au Jackson	Jums St., Ste. 2 1:118, FL 33204	105		
ARTICLE III PURPO The purpose for which the	SE ne corporation is organized is:	e Prac	tice	of Im
			· · · · · · · · · · · · · · · · · · ·	
ARTICLE IV SHARE The number of shares of aRTICLE V INITIA	stock is:			
Name and Title	non	Name and Title:_ Address:		
	Juste 105 Juskyonville, FL	- 33204 -		
Name and Title:		_ Name and Title:_		
Address		Address:	_	
Name and Title:		_ Name and Title:_		
Address		Address:		
			-	
		<u> </u>		

Name and Title:	Name and Title:	
Address	Address:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of	of the registered agent is:	
Name: However Jett 5	_	
Address: 630 Houns St., Ste	- •	
Jucksonville, FL 33	204	
ARTICLE VII INCORPORATOR		
The name and address of the Incorporator is:	·	
Name: Androw teters	-te 106	
	ete. 205	
JULKGONVIlle, FL 3		
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 cann filing.)	ot be more than five days prior or 90 days after the	
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records	e statutory filing requirements, this date will not be listed as	
Having been named as posistered agent to accept service of proce	rss for the above stated corporation at the place designated in	
this certificate, am familiar with and accept the appointment as r	egistered agent and agree to act in this capacity	
Required Signature/Registered Agent		
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a		
document of the Department of State constitutes a third degree fel	ony as provided for in \$ \$17.155, F.S.	
Accounted Signature/Incorporator	$\frac{11/20/11}{\text{Date}}$	
/ - Medifined Signature theoripotator	/ /	

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be:	Petery Firm, P.A.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
Co30 Adums St., o Jackson Ville, FL 3	3204
<u>ARTICLE III PURPOSE</u> The purpose for which the corporation is organized in	The fractice of law
ARTICLE IV SHARES The number of shares of stock is:)
Name and Title: And Yew Peter	et 4 Pragical Name and Title:
Suite 1	
Juckson Vill	le, FL 33204
Name and Title:	Name and Title:
Address	Address:
Name and Title:	Name and Title:
Address	Address:

Name and Title:	Name and Title:
Address	Address:
 -	<u></u>
	.
ARTICLE VI REGISTERED AGENT	f the registered agent is:
The name and Florida street address (P.O. Box NOT acceptable) of	THE RESIDENCE OF THE PROPERTY
Name: HATTY 1871	- 1.
Address: 630 Adams St., Ste	- - - (
Jucksonville, FL 333	204
•	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Hodrew Leters	-
Address: 630 Hams Sty	te. 205
JUKGONVILLE FL 3	3204
Juck-villing	(
ARTICLE VIII EFFECTIVE DATE:	(OPTIONAL)
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cann	ot 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	e 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 existered agent to accept service of proce	ss for the above stated corporation at the place designated in
Having been refined as registered agent to accept service of proce this certificate, am familiar with and accept the appointment as r	egistered agent and agree to act in this capacity
Martiner -	
Required Signature/Registered Agent	, Day
I submit this dood ment and affirm that the facts stated herein as documently the Department of State constitutes a third degree fel	re true. I am aware that the false information submitted in a only as provided for in s \$17.155, F.S.
A A A A A A A A A A A A A A A A A A A	11/20/17
Remined Signature/Incorporator	Dafe
- vaddaga a Durini - mark	1 1