

04/06/2018

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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC  
Account Number : I20070000020  
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FLORIDA DEPARTMENT OF STATE  
FALL AFRASSEE, FLORIDA

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: SH@Jaimehewittesq.com

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
SUPPORT OF COMMERCIAL  
INFORMATION SERVICES

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**Jaime Hewitt, P.A.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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**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: Jaime Hewitt, P.A.**ARTICLE II PRINCIPAL OFFICE**Principal street address13800 Tamiami Trail N.Ste. #110Naples, Florida 34104

Mailing address, if different is:

13800 Tamiami Trail N.Ste. #110Naples, Florida 34104**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Professional Attorney ServicesFILED  
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TALLAHASSEE, FLORIDA**ARTICLE IV SHARES**The number of shares of stock is: 1000 Common Stock at \$0.10 Par Value**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Jaime Hewitt D,P,S,T

Name and Title: \_\_\_\_\_

Address 13800 Tamiami Trail N.

Address: \_\_\_\_\_

Ste. #110Naples, Florida 34104

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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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: Jaime Hewitt  
 Address: 13800 Tamiami Trail N., Ste. #110  
Naples, Florida 34104

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: Jaime Hewitt  
 Address: 13800 Tamiami Trail N., Ste. #110  
Naples, Florida 34104

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 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*

[Signature]  
 Required Signature/Registered Agent

04/06/2018

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.817.135, F.S.*

[Signature]  
 Required Signature/Incorporator

04/06/2018

Date

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