

P18000034631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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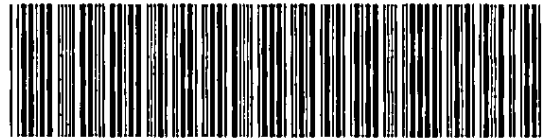
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
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APR 12 2018

## COVER LETTER

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

**SUBJECT:** Mogel & Goldsmith 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: Marc W. Goldsmith  
Name (Printed or typed)  
6399NW 23rd Way  
Address  
Boca Raton, FL 33496  
City, State & Zip  
617.416.7638  
Daytime Telephone number  
marc@mgallc.net  
E-mail address: (to be used for future annual report notification)

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**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: Mogel & Goldsmith P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal **street** address

Mailing address, if different is:

6399NW 23rd way

Boca Raton, FL 33496

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to provide expert energy and witness consulting services.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Marc W. Goldsmith, Director

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

Address 6399NW 23rd Way

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

Boca Raton, FL 33496

Name and Title: William A. Mogel, Director

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

Address 6325 Graycliff Drive Unit C

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

Boca Raton, FL 33496

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

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

Address \_\_\_\_\_

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

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

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\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Marc W. Goldsmith

Address: 6399NW 23rdWay

BocaRatonFL, 33496

**ARTICLE VII INCORPORATOR**

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

Name: William A Mogel

Address: 6325Graycliff Drive Unit C

BocaRaton,FL 33496

**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.)

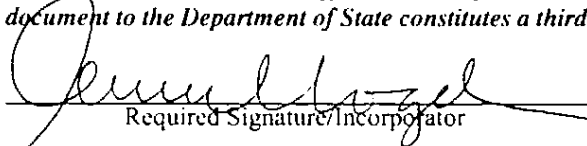
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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

\_\_\_\_\_  
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

2/13/18  
\_\_\_\_\_  
Date