

PI 800094616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

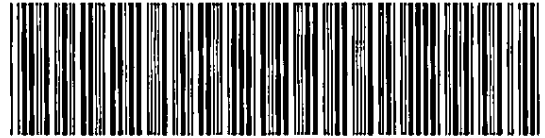
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COVER LETTER

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

SUBJECT: Law Office of Douglas K. McKoy, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Douglas K. McKoy

Name (Printed or typed)

302 N. Main St., Suite B

Address

Trenton, FL 32693

City, State & Zip

352-490-4488

Daytime Telephone number

doug@chiefndlegal.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: Law Office of Douglas K. McKoy, P. A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

302 N. Main St., Suite B

Same as Street Address

Trenton, FL 32693

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: the practice of law.

ARTICLE IV SHARES

The number of shares of stock is: One Thousand (1,000)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Douglas K. McKoy, President

Name and Title:

Address 302 N. Main St., Suite B

Address:

Trenton, FL 32693

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: Douglas K. McKoy

Address: 302 N. Main St., Suite B

Trenton, FL 32693

ARTICLE VII INCORPORATOR

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

Name: Douglas K. McKoy

Address: 302 N. Main St., Suite B

Trenton, FL 32693

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: January 1, 2019. (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

Douglas K. McKoy

Required Signature/Registered Agent

11-9-18

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.

Douglas K. McKoy

Required Signature/Incorporator

11-9-18

Date