

P19000063110

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

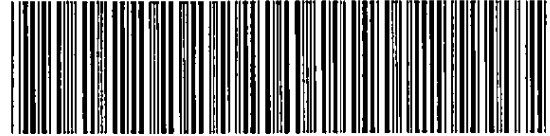
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

AUG 13 2019



500333156445

08/13/19--01007--014 **70.00

19 AUG 13 AM 10:49

2019 AUG 13 AM 11:34

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Amy R. Barrett 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: Bryan W. Sykes, Esq.

Name (Printed or typed)

c/o Meridian Partners Law P.A., 4923 West Cypress Street

Address

Tampa, FL 33607

City, State & Zip

(813) 443-5260

Daytime Telephone number

bryan@meridianpartnerslaw.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: Amy R. Barrett P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

311 Park Place Blvd.

Suite 600

Clearwater, FL 33759

Mailing address, if different is:

P.O. Box 4844

Clearwater, FL 33758

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to practice the profession
of real estate

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Amy R. Barrett, President

Address 311 Park Place Blvd.

Suite 600

Clearwater, FL 33759

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

FILED
2019 AUG 13 AM 11:34
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: Bryan W. Sykes, Esq. _____

Address: 4923 West Cypress Street _____

Tampa, FL 33607 _____

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Bryan W. Sykes, Esq. _____

Address: 4923 West Cypress Street _____

Tampa, FL 33607 _____

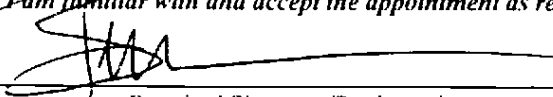
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: August 12, 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

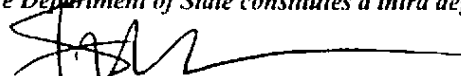


Required Signature/Registered Agent

August 12, 2019

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

August 12, 2019

Date