

PIA000006AZU6

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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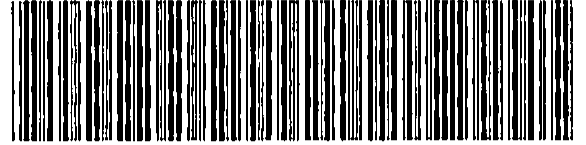
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 AUG 14 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: Wesley Hoffman PA
(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: Wesley Hoffman
Name (Printed or typed)

1503 SW 9th Ave.
Address

Boynton Beach
City, State & Zip

(856) 473-2402
Daytime Telephone number

whoff1025@gmail.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 Wesley Hoffman PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is.

1503 SW 9th Ave.

Boynton Beach, FL 33426

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Business

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title Wesley Hoffman / President

Name and Title:

Address 1503 SW 9th Ave

Address

Boynton Beach, FL 33426

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address.

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SECRETARY OF STATE
TALLAHASSEE, FL

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: Wesley Hoffman
Address: 1503 SW 9th Ave.
Boynton Beach, FL 33426

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Wesley Hoffman
Address: 1503 SW 9th Ave.
Boynton Beach, FL 33426

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.

Wesley Hoffman
Required Signature/Registered Agent

8/14/2019
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.

Wesley Hoffman
Required Signature/Incorporator

8/14/2019
Date