

P26000022652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

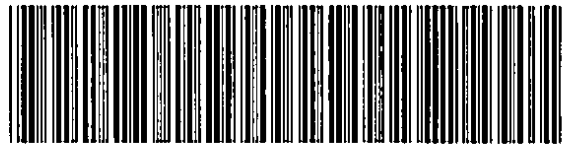
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/18/20--00004--011 **70.00

RECEIVED

FEB 18 2020

CORP

Brian Lee Allen, P.A.
837 NE 17th Way
Fort Lauderdale, FL 33307
305-968-4653 / brian@brianleecallen.com

February 4, 2020

Department of State
Division of Corporation
PO Box 6327
Tallahassee, FL 32314

To whom it may concern:

It was brought to my attention that my previous corporation (Document #P18000034575) was not renewed, as I never received an email reminder. Therefore, I am enclosing my new Articles of Incorporation along with the payment of \$70.00. I have no intention of re-instating the prior corporation and as I am one and the same person, I would like to incorporate using the same corporation name. Please process the attached articles and payment.

Sincerely,


Brian Lee Allen, President

FILED
2020 FEB 19 AM 6:51
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

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

SUBJECT: Brian Lee Allen 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
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: Brian Lee Allen
Name (Printed or typed)

837 NE 17th Way
Address

Ft Lauderdale FL 33304
City, State & Zip

305-968-4653
Daytime Telephone number

brian@brianleeallen.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

2020 FEB 19 AM 6:57
SECRETARY OF STATE
TALLAHASSEE, FL

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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: Brian Lee Allen PA

ARTICLE II PRINCIPAL OFFICE

Principal street address
837 NE 17th Way
Fort Lauderdale, FL 33304

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all legal business
marketing, Advertising, Real Estate

ARTICLE IV SHARES

The number of shares of stock is: 100 shares @ \$1⁰⁰ par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Brian Lee Allen, President Name and Title: _____

Address: 837 NE 17th Way Address: _____
Fort Lauderdale FL 33304

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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2020 FEB 19 AM 6:57
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: Brian Lee Allen
Address: 837 WE 17th Way
Fort Lauderdale FL 33304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Brian Lee Allen
Address: 837 WE 17th Way
Fort Lauderdale FL 33304

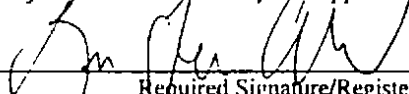
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 2/9/2020 (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.)

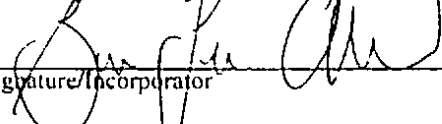
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

2/04/2020
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

2/04/2020
Date

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SECRETARY OF STATE
TALLAHASSEE, FL