

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

P20000043932

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : SORSHER & ASSOCIATES, LLC.
Account Number : I20170000056
Phone : (954)842-2931
Fax Number : (954)842-2936

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
EUGENE DISON, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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JUN 16 2020

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SORSHER & ASSOCIATES

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6/16/2020 10:16:36 AM PAGE 1/001 Fax Server



June 16, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SORSHER & ASSOCIATES, LLC

SUBJECT: EUGENE DISON, P.A.
REF: W20000060562

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The specific business purpose of the professional association must be stated in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Lillie S Kervin
Regulatory Specialist II

FAX Aud. #: H20000180921
Letter Number: 420A00011821

COVER LETTER

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

SUBJECT: EUGENE DISON, 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 Filing Fee & Certified Copy

☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: _____ DISON, EUGENE
Name (Printed or typed) _____

15807 BISCAYNE BLVD, 213
Address

N MIAMI BEACH, FL 33160
City, State & Zip

(954) 257-8664
Daytime Telephone number

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: EUGENE DISON, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

15807 BISCAYNE BLVD, 213

15807 BISCAYNE BLVD, 213

N MIAMI BEACH, FL 33160

N MIAMI BEACH, FL 33160

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE BROKER SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DISON, EUGENE - P Name and Title: _____

Address 15807 BISCAYNE BLVD, 213 Address: _____

N MIAMI BEACH, FL 33160 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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: DISON, EUGENE
 Address: 15807 BISCAYNE BLVD, 213
N MIAMI BEACH, FL 33160

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DISON, EUGENE
 Address: 15807 BISCAYNE BLVD, 213
N MIAMI BEACH, FL 33160

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

Eugene Dison

Required Signature/Registered Agent

06/15/2020

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.

Eugene Dison

Required Signature/Incorporator

06/15/2020

Date