

P20000059903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

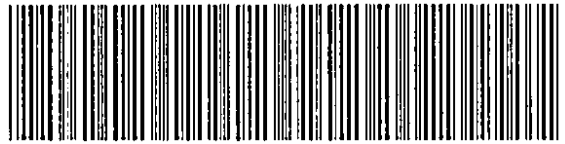
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

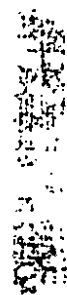
W20-85743

Office Use Only



300349437433

08/06/20---01003--010 **70.00



2020 AUG -5 PM 4:39

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FL

2020 AUG -7 AM 11:48

N. C. H. H. H.

AUG 10 2020

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 08/05/2020

CERTIFIED COPY

xx **PHOTOCOPY**

☐ **CUS**

xx **FILING**

1. **VICTORIA G STRICKLER PA**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**



2020 AUG -7 PM 3:49

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 6, 2020

CORP ACCESS

SUBJECT: VICTORIA G STRICKLER PA
Ref. Number: W20000085743

Corrected

We have received your document for VICTORIA G STRICKLER PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

KYLE D BRUMBLEY
Regulatory Specialist II

Letter Number: 520A00014755

COVER LETTER

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

SUBJECT: Victoria G Strickler 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Victoria Strickler
Name (Printed or typed)

3014 N US Highway 301 Ste 700
Address

Tampa, FL 33619
City, State & Zip

813 262-1962
Daytime Telephone number

Vicki@royaltytitle.net
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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Victoria G Strickler PA

2020 AUG -7 AM 11

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different

3014 N US Highway 301 Suite 700
Tampa, FL 33619

SECRETARY OF S
TALLAHASSEE,

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Victoria Strickler President

Name and Title:

Address

4534 Highland Creek Dr
Plant City, FL 33567

Address:

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:

Victoria Strickler

Address:

4534 Highland Creek Dr
Plant City FL 33567

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Victoria Strickler

Address:

4534 Highland Creek Dr
Plant City FL 33567

2020 AUG -7 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 8/01/2020 (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

[Signature]

Required Signature/Registered Agent

8/5/2020

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.

[Signature]

Required Signature/Incorporator

8/5/2020

Date