

P21 0000010238

(Requestor's Name)

(Address)

(Address)

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PICK-UP WAIT MAIL

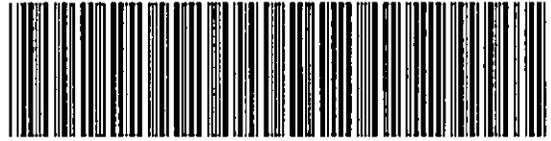
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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W 20000127730

Mr. Thompson,

Attached to this letter is the document I was sent with the corrections. If this is still not acceptable, please let me know by mail or by cell phone at 239-887-0969.

Thank you for your time; I hope you have a wonderful holiday season.

Robert Kennedy
239-887-0969
rjk@robertjkennedylaw.com

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2020 DEC -4 AM 10:47

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2020

ROBERT KENNEDY
13545 EAGLE RIDGE RD., 814
FORT MYERS, FL 33912

SUBJECT: THE LAW FIRM OF ROBERT J. KENNEDY, P.A.
Ref. Number: W20000127730

*Please See
Corrections*

We have received your document for THE LAW FIRM OF ROBERT J. KENNEDY, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

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

Derrick Thompson
Regulatory Specialist II
New Filing Section

Letter Number: 420A00022191

2020 DEC -4 AM 10:47

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2020 DEC -4 AM 11:38

COVER LETTER

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

SUBJECT: The Law Firm of Robert J. Kennedy, 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 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: Robert Kennedy
Name (Printed or typed)

13545 Eagle Ridge Rd # 814
Address

Fort Myers, FL ~~33901~~ 33912
City, State & Zip

239-887-0969
Daytime Telephone number

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

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

TALLAHASSEE, FL 32314
2020 DEC -4 AM 10:47
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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: The Law Firm of Robert J. Kennedy, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 13545 Eagle Ridge Dr #814
Fort Myers FL 33912

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide legal services
to the citizens of Southwest Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS CEO

Name and Title: Robert Kennedy ~~attorney~~ Name and Title: _____
Address: 13545 Eagle Ridge Dr Address: _____
#814
Fort Myers FL 33912

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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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: Robert Kennedy
 Address: 13545 Eagle Ridge Dr
#514 Ft. Myers FL 33912

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Robert Kennedy
 Address: 13545 Eagle Ridge Dr
#514 Ft Myers FL 33912

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

 Required Signature/Registered Agent 10/18/20
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 10/18/20
Date