

P22000065917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

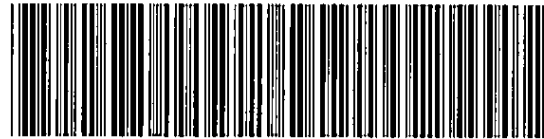
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Justin Henry, P.A.

Signature _____

Requested by: SETH

08/19/22

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

174 Penders Printing - Thomasville, GA 30084

____ Art of Inc. File _____
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____ RA Resignation _____
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____ Certificate of Fictitious Name _____
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COVER LETTER

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

SUBJECT: JUSTIN HENRY, 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: JUSTIN HENRY

Name (Printed or typed)

8521 SW 145TH STREET

Address

PALMETTO BAY, FL 33158

City, State & Zip

305-302-9984

Daytime Telephone number

JUD@SKYELOUISREALTY.COM

E-mail address: (to be used for future annual report notification)

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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: JUSTIN HENRY, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address

8521 SW 145TH STREET

PALMETTO BAY, FL 33158

Mailing address, if different is:

8521 SW 145TH STREET

PALMETTO BAY, FL 33158

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: LICENSED REAL ESTATE PROFESSIONAL

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P Name and Title: _____

Address JUSTIN HENRY Address: _____

8521 SW 145TH STREET

PALMETTO BAY, FL 33158

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: JUSTIN HENRY
Address: 8521 SW 145TH STREET
PALMETTO BAY, FL 33158

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JUSTIN HENRY
Address: 8521 SW 145TH STREET
PALMETTO BAY, FL 33158

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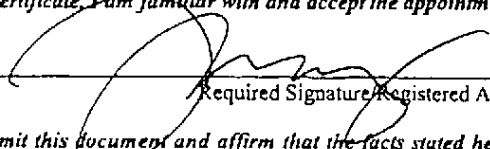
ARTICLE VIII EFFECTIVE DATE:

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.

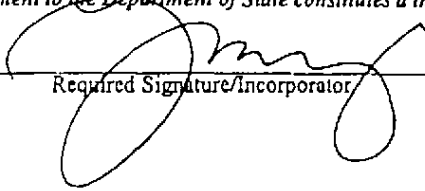
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

8/20/2022
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

8/20/2022
Date