P23000048606

Leslie Keller 8004323622
***please honor 6/23 date; see notes on all attachments

Florida Department
Division of Corpo...
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000224775 3)))

H23000224775 3ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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
MICHEYLE CARLINI, PA

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	$78.75

***PLEASE HONOR
6/23 SUBMISSION DATE

RECEIVED
2023 JUN 27 PM 1:43
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
COMMERCIAL
SERVICES

2023 JUN 23 PM 12:46
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

Leslie Sellers

From:	faxfinder@capitolservices.com
Sent:	Friday, June 23, 2023 5:14 PM
To:	Leslie Sellers
Subject:	FaxFinder Fax Notification: Successfully sent fax to 850-617-6381
Attachments:	fax_outbound_850-617-6381_20230623_161333_00006E6B-0000.pdf

Create Time: 06/23/2023 04:03:27 PM
Schedule Time: 06/23/2023 04:13:33 PM
State: sent
Schedule Message: Successfully sent fax
Hangup code: 0
Try #: 1
Username: admin
Sender name: Leslie Sellers
Sender email: lsellers@capitolservices.com Sender phone: 855-498-5500 Sender fax: 800-432-3622 Sender org: Capitol Services, Inc.
Subject: H23000224775
Max tries: 5
Try interval: 600
Priority: 3
Pages: 6
Recipient fax: 850-617-6381
Recipient phone:
Recipient name:
Recipient org: FL SOS
Use cover page: true
Receipt: always
Print receipt: never
Print receipt printer:
Print receipt first page: false
Fax Page Size: auto

[redacted]

Leslie Sellers

From: faxfinder@capitolservices.com
Sent: Friday, June 23, 2023 4:55 PM
To: Leslie Sellers
Subject: FaxFinder Fax Notification [redacted]
Attachments: fax_outbound_850-617-6381_20230623_155428_00006E67-0000.pdf

Create Time: [redacted]
Schedule Tim[redacted]
State: failed
Schedule Message: fail
Hangup code: 0
Try #: 5
Username: admin
Sender name: Leslie Sellers
Sender email: lsellers@capitolservices.com Sender phone: 855-498-5500 Sender fax: 800-432-3622 Sender org: Capitol Services, Inc.
Subject: H23000224775
Max tries: 5
Try interval: 600
Priority: 3
Pages: 5
Recipient fax: 850-617-6381
Recipient phone:
Recipient name:
Recipient org: FL SOS
Use cover page: true
Receipt: always
Print receipt: never
Print receipt printer:
Print receipt first page: false
Fax Page Size: auto

COVER LETTER

H23000224775

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

SUBJECT: Micheyle Carlini, 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: Micheyle Carlini, PA
Name (Printed or typed)

26 Center LN
Address

Key Largo, FL 33037
City, State & Zip

954-232-4965
Daytime Telephone number

macarlini24@gmail.com
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)

H23000224775

ARTICLE I NAME
The name of the corporation shall be: Micheyle Carlini, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address
26 Center LN
Key Largo, FL 33037

Mailing address, if different is:

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: Micheyle Carlini, P
Address 26 Center LN
Key Largo, FL 33037

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

2023 JUN 23 PM 12:46
TALLAHASSEE, FLORIDA

H23000224775

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: Stephanie Scheinman, EA

Address: 3107 Peachtree Cir

Davie, FL 33328

ARTICLE VII INCORPORATOR

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

Name: Stephanie Scheinman, EA

Address: 3107 Peachtree Cir

Davie, FL 33328

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

Stephanie Scheinman

Required Signature/Registered Agent

6-23-23

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.

Stephanie Scheinman

Required Signature/Incorporator

6-23-23

Date

FILED
2023 JUN 28 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA