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Division of Corporations

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From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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## FLORIDA PROFIT/NON PROFIT CORPORATION LINDSEY MANDLER, P.A.

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## **COVER LETTER**

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

SUBJECT: Lindse	y Mandier, P.A.			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an onig	ginal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
□ \$70.00 Filing Fee	<ul><li></li></ul>	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate o Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: Lin	ndsey Mandler Nam	e (Printed or typed)		
7293 NW Second Avenue Address				
Mi	ami, FL 33150	Addi ess		
	City	, State & Zip	_	
78	5-321-3811			
	Daytime 1	elephone number		
lind	sey@caldera,law			
	E-mail address: (to be use	d for future annual report n	otification)	

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

		COPROBATION FILED
	ARTICLES OF IN	CORPORATION
	In compliance with Chapter 607 a	corporation on the condition of the cond
ARTICLE I NAME		2024 FEB -2
The name of the corpora	tion shall be: Lindsey Mandler, P.A	SECTIFICACIONES TATE
	CIPAL OFFICE	SELT ATI ASSECT
	Principal street address	Mailing address, if different is:
7293 NW Second Avenue Mlami, FL 33150	<u></u>	
		<del> </del>
	the corporation is organized is: I DIS CO	rporation is intended to be a professional service
corporation within t	ne meaning of the Professional Se	ervice Corporation Act, and accordingly, the
Corporation, Its of	fficers, directors, and sharehold	ers shall be subject to all of the sections of
said Act concerni	ng the formation of the Corpora	tion, the conduct of its business, and the
liabilities, rights, p	privileges and immunities of this	Corporation and its officers, directors, and
shareholders, as st	ated in Chapter 621, Florida Statu	tes.
	· · · · · · · · · · · · · · · · · · ·	
	stock is: 1,000	
Name and Title	E. Lindsey Mandler, Director	Name and Title:
Address	7293 NW Second Avenue	Address:
	Miami, FL 33150	
Name and Title	: <u></u>	Name and Title:
Address		Address:
Name and Title		Name and Title:
Address		Address:

Name a	nd Title:	Name and Title:	
Addres		Address:	_
			_
ARTICLE VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	Caldera Law PLLC	_	
Address:	7293 NW Second Avenue	_	
	Miami, FL 33150	_	
ARTICLE VII	INCORPORATOR		
The <u>name and s</u>	address of the Incorporator is:		
Name:	Lindsey Mandler	_	
Address:	7293 NW Second Avenue	_	
	Miami, FL 33150	_	
	EFFECTIVE DATE:		
	f other than the date of filing:  date is listed, the date must be specific and cann	. (OPTIONAL) of be more than five days prior or 90 days after the	
	e inserted in this block does not meet the applicable effective date on the Department of State's records	e statutory filing requirements, this date will not be listed	B5
	med as registered agent to accept service of process ; familiar with and accept the appointment as registe	for the above stated corporation at the place designated in cred agent and agree to act in this capacity	his
-M	12AA	February 1, 2024	_
V	Required Gignature/Registered Agent	Date	
I submit this do document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felor	e true. I am aware that the false information submitted in my as provided for in s.817.155, F.S.	12
Lindsey	Mandler	February 1, 2024	
Required Signat	ure/Incorporator	Date	-