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**ROSE A. WALKER, P.A.**

10081 Pinex Blvd., Suite C-1  
Pembroke Pines, Florida 33024

**ATTORNEY AT LAW**

Phone (305) 437-6594  
(305) 437-5307  
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April 5, 1995

Division of Corporation  
George Firestone Bldg.  
409 East Gaines Street  
Tallahassee, Florida 32314

Re: Articles of Incorporation  
Smith-Daly P.A.  
A Professional Association

400001449794  
-04/06/95--01079--019  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

To Whom It May Concern:

Enclosed find a check in the amount of \$70.00 to file the above referenced Articles of Incorporation together with the original and copy of the document.

I have enclosed a self-address stamped envelope for returning of document.

If you have any questions regarding the above, please contact the undersigned.

Very truly yours,

Rose A. Walker, P.A.

*Marlo Garcia*  
Marlo Garcia, Secretary

FILED  
55 APR -5 PM 3 23  
TALLAHASSEE, FLORIDA

/mc

encls

NANCY HENDRICKS APR 12 1995

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SECRETARY  
TALLAHASSEE

**ARTICLES OF INCORPORATION  
OF**

**SMITH-DALY P.A.**  
A Professional Association

The undersigned subscriber to these Articles of Incorporation, hereby forms a corporation under Chapter 624 of the laws of the State of Florida.

**ARTICLE I**

The name of the corporation is SMITH-DALY, P.A.

**ARTICLE II**

**DURATION AND BEGINNING OF CORPORATE EXISTENCE**

The corporation shall exist perpetually. The corporate existence shall commence as of the filing of the Articles of Incorporation.

**ARTICLE III**

**PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

10081 Pines Blvd., Suite C-1  
Pembroke Pines, Florida 33024

**ARTICLE IV**

The corporation is organized for the purpose of engaging in the practice of law.

**ARTICLE V**

**CAPITAL STOCK**

The corporation is authorized to have outstanding one class of stock designated as common stock. The maximum number of shares of common stock which the corporation is authorized to have outstanding is 100 shares of common stock at \$1.00 par value per share.

**ARTICLE VI**

The name of the initial registered agent of this corporation is MICHELLE SMITH.  
The street address of the initial registered office of the corporation in the State of Florida is

10081 Pines Blvd., Suite C-1  
Pembroke Pines, Florida 33024

**ARTICLE VII**

**INITIAL BOARD OF DIRECTORS**

The corporation shall have ( 1 ) initial director. The number of directors may be

increased or decreased from time to time in the manner provided in the bylaws of the corporation. The name and street address of the initial director is:

MICHELLE SMITH  
4024 N.W. 90th Avenue  
Sunrise, Florida 33351

ARTICLES VIII  
INCORPORATION

The name and address of the incorporator of these Articles of Incorporation is:

MICHELLE SMITH  
4024 N.W. 90th Avenue  
Sunrise, Florida 33351

ARTICLE IX  
BYLAWS

The power to adopt, alter, amend, or repeal bylaws shall be vested in the Board of Directors and the shareholders.

ARTICLE X  
INDEMNIFICATION

The corporation shall indemnify to the full extent permitted by law, the incorporator, any officer, director, employee, or agent of the corporation, or any former officer, director, employee, or agent of the corporation, or any person who at the request of the corporation is or was serving as a director, officer, employee, or agent of another corporation, partnership, joint venture, trust or other enterprise.

ARTICLE XI  
AMENDMENT

This corporation reserves the right to amend or repeal any prior provisions contained in these Articles of Incorporation or any amendment thereto.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation, this 4<sup>th</sup> day of April, 1995.

Michelle Smith

STATE OF FLORIDA

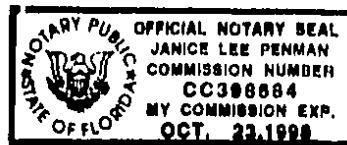
COUNTY OF BROWARD

BEFORE ME, a Notary Public authorized to take acknowledgement in the State and County set forth above, personally appeared Michelle Smith known to me and who has produced a Personality as identification and who did take an oath and who executed the foregoing Articles of Incorporation, and acknowledged before me that executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 2/11 day of April, 1998.

  
NOTARY PUBLIC  
State of Florida at Large

Rubber stamp seal:



FILED  
95 APR -3 PM 6 24  
RECEIVED  
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0505, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

SMITH-DALY P.A.

2. The name and address of the registered agent and office is:

MICHELLE SMITH  
(NAME)

10081 Pines Blvd., Suite C-1  
(P.O.BOX NOT ACCEPTABLE)

PEMBROKE PINES, FLORIDA 33024  
(CITY/STATE/ZIP)

SIGNATURE

Michelle Smith  
(Corporate Officer)

TITLE PRESIDENT

DATE

4/4/95

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. IF FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Michelle Smith

DATE

4/4/95

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR 1/6  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 12150000.28585

1. Corporation Name

SMITH DALY, P.A.

Principal Place of Business

7800 W. Oakland Park Blvd.  
Suite B-303  
Sunrise, FL 33351

Mailing Address

If above addresses are incorrect in any way, list through incorrect information and enter correction below

2. New Principal Office Address, if Applicable

Same as above

3. New Mailing Address, if Applicable

Same as above

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE  
4. Date Incorporated or Qualified  
To Do Business in Florida

5. FLE Number

65-0571676

Applied For

Not Applicable

CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Titles	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P/D	Michelle A. Smith	7800 W. Oakland Park Blvd. Suite B-303	Sunrise, FL 33351
T	Christopher Daly	7800 W. Oakland Park Blvd. Suite B-303	Sunrise, FL 33351

REINSTATEMENT 1996

8. Name and Address of Current Registered Agent

Michelle A. Smith  
7800 W. Oakland Park Blvd.  
Suite B-303  
Sunrise, FL 33351

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Michelle A. Smith

REGISTERED AGENT MUST SIGN

Date

12/16/96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information on intangible tax)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(a) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Michelle A. Smith

SIGNATURE:

Michelle A. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/16/96

Date

(954) 572-4662

Daytime Phone