

1201 HAYS STREET

800-342-8086

PR500038707



ACCOUNT NO. : 0721000000032

REFERENCE : 599763 6849A

AUTHORIZATION : *Patricia Pyatt*

COST LIMIT : 970.00

ORDER DATE : May 16, 1995

ORDER TIME : 11:40 AM

ORDER NO. : 599763

CUSTOMER NO: 6849A

100001488871

CUSTOMER: Ms. Sharon Morgan
ASMA & WRIGHT

886 South Dillard Street

Winter Garden, FL 34787

DOMESTIC FILING

NAME: WILLIAM N. ASMA, P.A.

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jodie Krebs

EXAMINER'S INITIALS: _____

RECEIVED
95 MAY 16 PM 12:15
DIVISION OF CORPORATION

FILED
95 MAY 16 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. BROWN MAY 16 1995

ARTICLES OF INCORPORATION
OF
WILLIAM N. ASMA, P.A.

FILED
95 MAY 16 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 621 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

WILLIAM N. ASMA, P.A.

The address of the principal office of this corporation shall be 886 South Dillard Street, Winter Garden, Florida 34787, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage in every aspect of the business of rendering the same professional services to the public that an Attorney At Law, duly licensed under the laws of the State of Florida, is authorized to render. This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

"

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock having \$1.00 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Service Company.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. OFFICERS AND DIRECTORS

This corporation shall have one officer and one director, initially. The name and street address of the initial officer and director who shall hold office for the first year of the corporation, or until his successor is elected or appointed is:

William N. Asma
Dir./Pres.

886 South Dillard Street
Winter Garden, Florida 34787

ARTICLE VII. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Service Company, has hereunto set their hand and seal of Corporation Service Company on May 16, 1995.

CORPORATION SERVICE COMPANY

By: *Gail Shelby*
Its Agent, Gail Shelby

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN ARTICLES OF INCORPORATION

Corporation Service Company, a Delaware corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION SERVICE COMPANY

By: *Gail Shelby*
Its Agent, Gail Shelby

KBR/jwk

P95 **STATE OF FLORIDA** **OFFICE OF THE COMPTROLLER** **APPLICATION FOR REFUND** 38707

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred. Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section _____, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: William N. Asma, Esq. EIN or SS#: _____

Address: P. O. Box 771340

Winnipeg Garden, Fla. 34777-1340

Amount: \$35.00 Date Paid 6-12-96

Reason for claim: Withdrawal of Statement of Change of Registered Agent

William N. Asma, P.A., #P95000038707. The change was made on the 1996

THELMA LEWIS/AMENDMENTS

Certified true and correct this _____ day of _____, 19_____.

Signature _____

* Must be completed if authority is other than Section 215.26, Florida Statutes.

For Agency Use Only	
Agency recommends approval of above claim and submits the following information to substantiate the claim. Amount of recommended refund \$ <u>35.00</u>	
The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on State Treasury's Receipt No. <u>01087 000</u> dated <u>5/5/96</u>	
Name of Account <u>45202130001453000000000010000</u>	
Statutory Authority for Collection <u>607.0122</u>	
It is requested that payment be made from the following account:	
NAME OF ACCOUNT <u>452021300014530000000022002000</u>	
Certified true and correct this _____ day of _____, 19_____	
Department of State, Division of Corporations (Agency) _____ (Authorized Signature and Title)	



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 12, 1996

WILLIAM N. ASMA, ESQ.
P. O. BOX 771340
WINTER GARDEN, FL 34777-1340

SUBJECT: WILLIAM N. ASMA, P.A.
Ref. Number: P95000038707

We have received your document for WILLIAM N. ASMA, P.A. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Our records indicate the above corporation changed the registered agent on the 1996 annual report filed 2-29-96. Your \$35 will be refunded, please allow 60 days for processing.

If you have any questions concerning this matter, please either respond in writing or call (904) 487-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 096A00029292

P95000038707
WILLIAM N. ASMA, P.A.
Attorney and Counselor At Law

888 South Dillard Street
Post Office Box 771340
Winter Garden, Florida 34777-1340

(407) 858-5750
Fax No. (407) 858-0488

May 29, 1998

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-06/04/96--01067--009
*****35.00 *****35.00

Secretary of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RE: William N. Asma, P.A.
Statement of Change of Registered Agent

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Agent form duly executed by William N. Asma as President of the above-named corporation along with a check in the amount of \$35.00 as your fee for making the change in Registered Agent so indicated on the enclosed form.

Thank you for your attention to this matter. Please return a copy of this letter indicating your receipt of same in the enclosed envelope.

Sincerely,

WILLIAM N. ASMA, P.A.



William N. Asma

WNA:sm
Enclosures