

P97000051558  
TRANSMITTAL LETTER

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

400002198514--4  
-05/02/97--01154--011  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:

Viles Law Firm, P.A.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Marcus Viles

Name (Printed or typed)

4415 Metro Parkway, Suite 200

Address

Ft. Myers, FL 33916

City, State & Zip

941-274-3333

Daytime Telephone number

630-521-532  
W97-13208

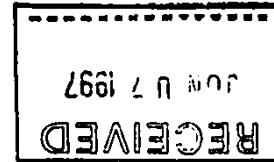
FILED  
STATE  
CORPORATIONS  
07 JUN 1997

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

9/1/97



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State



June 5, 1997

MARCUS VILES  
4415 METRO PARKWAY #200  
FORT MYERS, FL 33916

SUBJECT: VILES LAW FIRM, P.A.  
Ref. Number: W97000013208

FILED STATE  
SECRETARY OF STATE  
JUN 11 1997

We have received your document for VILES LAW FIRM, P.A. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

Please complete Article(s) IV.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden  
Document Specialist

Letter Number: 297A00030491

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

Viles Law Firm, P.A.

### ARTICLE II PRINCIPAL OFFICE

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

4415 Metro Parkway Suite 200  
Ft. Myers, FL 33916

FILED  
STATE  
SECRETARY OF  
DIVISION  
97 JUN 11

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Marcus W. Viles  
4415 Metro Parkway, Suite 200  
Ft. Myers, FL 33916

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Maras Viles  
4415 Metro Parkway Suite 200  
Ft. Myers, FL 33916

**ARTICLE VI (Nature of Business)**

The business shall be the  
practice of law.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22 day of May, 19 97.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 Viles Law Firm, P.A.

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

Marcus Viles  
(NAME)

4415 Metro Parkway Ste 200  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Ft. Myers, FL 33916  
(CITY/STATE/ZIP)

*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. I 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)

5/7/97  
(DATE)