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☐ Walk in ☐ Mail out	Pick up time Will wait	Certified Copy Certificate of Status	PH 2: 22
Profit NonProfit Limited Liability Domestication	AMENDMENTS Amendment Resignation of R.A., O Change of Registered Dissolution/Withdraw	70002330 -10/27/970 Agent #***122.50	1578 1071008 ****122.50
OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATI QUALIFICAT Foreign Limited Partnership Reinstatement Trademark	Marchine and Property I	8/9 ²

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 28, 1997

CARLSON & KLEIN, P.A. 15600 SW 288TH ST, STE 305 HOMESTEAD, FL 33033-1200

SUBJECT: ROBERT CARLSON, PA Ref. Number: W97000024480

We have received your document for ROBERT CARLSON, PA and your check(s) totaling \$122.50. 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.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of 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 (850) 487-6926.

Tracy Meyer Document Specialist

Letter Number: 797A00052274

CARLSON & KLEIN, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

15600 SOUTHWEST 288TH STREET SUITE 305

HOMESTEAD, FLORIDA 33033-1200

ROBERT E. CARLSON, CPA STEVEN C. KLEIN, CPA TEL: (305) 242-1455 • FAX (305) 242-1456

MEMBERS

AMERICAN INSTITUTE OF

CERTIFIED PUBLIC ACCOUNTANTS

FLORIDA INSTITUTE OF

CERTIFIED PUBLIC ACCOUNTANTS

October 31, 1997

Florida Department of Revenue Division of Corporations Attn: Tracy Meyer P.O. Box 6327 Tallahassee, Florida 32314

Re: Robert Carlson, PA

Dear Ms. Meyer,

We received your letter and returned document for the above mentioned corporation. We apologize for omitting the nature of the business from the description of the purpose. You will find the corrected document enclosed. The nature of the business has been described in "Article Three" of the Articles of Incorporation. This corporation is an office of Certified Public Accountants whose purpose is accounting for businesses and individuals. This should complete the incorporation for this business.

You may contact us at the above address and phone number if there are any further questions regarding this matter. Thank you for your help in resolving this matter.

Best Regards,

Michael L. Frederick

Vice-President

ARTICLES OF INCORPORATION

OF

ROBERT CARLSON, PA

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE ONE

The name of the corporation is ROBERT CARLSON, PA, and the principal office is located at <u>15600 S.W. 288th Street, Suite 305, Homestead, Florida 33033</u> or such other address as the officers may from time to time designate.

ARTICLE TWO DURATION

The time of existence of the corporation is perpetual.

ARTICLE THREE PURPOSE

The business purpose of this organization is a public practice of accounting for businesses and individuals. The corporation may engage in any or all lawful business permitted to corporations under the laws of the STATE OF FLORIDA, or any other state, country, territory or nation.

ARTICLE FOUR CAPITAL STOCK

The maximum number of shares which the corporation has authority to issue is 1,000 shares, all of which shall be common shares with a par value of \$1.00 each.

ARTICLE FIVE REGISTERED OFFICE

The principal address of the initial registered office of the corporation shall be <u>15600 S.W. 288 Street</u>, <u>Suite 305</u>, <u>Homestead</u>, <u>Florida 33033</u>. The name of the initial registered agent at such address is <u>Robert Carlson</u>.

ARTICLE SIX PRE-EMPTIVE RIGHTS

The shareholders shall have Pre-emptive Rights.

ARTICLE SEVEN DIRECTORS

The Board of Directors of the corporation shall consist of at least one member and not more than eleven.

The name and address of initial Directors of the Board is:

NAME

ADDRESS

Robert Carlson

15600 SW 288th Street, Suite 305 Homestead, Florida 33033

INCORPORATORS

The name and address of the incorporator is:

NAME

ADDRESS

Robert Carlson

15600 SW 288th Street, Suite 305 Homestead, Florida 33033

IN THE WITNESS WHEREOF, I have subscribed my name this <u>31st</u> day of <u>October</u>, 1997.

Robert Carlson, Director & Incorporator

STATE OF FLORIDA:

: SS

COUNTY OF DADE

On this <u>31st</u> day of <u>October</u>, 1997, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared Justo Rey, known to me to be the person whose name is subscribed to the within instrument, and acknowledge that he executed the same for the purpose herein contained.

IN THE WITNESS, I hereunto set my hand and official seal.

NOTARY PUBLIC

STATE OF FLORIDA AT LARGE

MY COMMISSION EXPIRES:



CERTIFICATION OF DESIGNATION

REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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 Robert Carlson, PA.
- 2. The name and address of the registered agent and office is Robert Carlson, 15600 S.W. 288 Street, Suite 305, Homestead, Florida 33033.

Robert Carlson, Registered Agent

10-31-97

Date

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATED TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Robert Carlson, Registered Agent

10-31-97

Date

State of Florida County of Dade

The foregoing instrument was acknowledged and sworn to before me this <u>31st</u> day of <u>October</u>, 1997.

Notary Public

My Commission Expires:

MICHAEL L. FREDERICK

My Comm Exp. 8/04/00

My Comm Exp. 8/04/00

Bonded By Service Ins

No. CC574341

APersonally Known | | Other t. D.