

TRANSMITTAL LETTER

P99000015484

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

000002775450--6
-02/15/99-01093-007
****122.50 *****78.75

SUBJECT: DEBI GHEORGE-~~ALLEN~~ ALLEN, 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: Debi Gheorge-Alten
Name (Printed or typed)

2564 Carambola Circle, N.
Address

Coconut Creek, FL 33066
City, State & Zip

(954) 728-1266
Daytime Telephone number

FILED
99 FEB 15 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Debi Alten GAVE
AUTHORIZATION BY PHONE TO
CORRECT add article IV - Purpose
DATE 2/17/99
DOC. EXAM BP NOTE: Please provide the original and one copy of the articles.

B. DRUCK FEB 17 1999

RT

ARTICLES OF INCORPORATION OF
DEBI GHEORGE-ALTEN, P.A.

ARTICLE I NAME

The name of the corporation shall be DEBI GHEORGE-ALTEN, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2564 Carambola Circle, North, Coconut Creek, Florida 33066.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time in One Hundred (100).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Debi Gheorge-Alten, 2564 Carambola Circle, North, Coconut Creek, Florida 33066.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Debi Gheorge-Alten, 2564 Carambola Circle, North, Coconut Creek, Florida 33066.

ARTICLE VI PURPOSE

The purpose of the corporation shall be for the practice of law.




Signature/Incorporator

2-11-99

Date

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/Registered Agent

2-11-99

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA