# TRANSMITTAL LETTER

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

CLIN LECT.		Escobar, 11			
SUBJECT:	(Proposed corporate name - must include suffix)				
				715 71015 ****70.00	
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a c	:heck for :		
☑ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL COR	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REOUTED	99,	
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NOTE: Please provide the original and one copy of the articles.



### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 13, 1999

JAVIER ESCOBAR II 4304 MCGIRTS BLVD JACKSONVILLE, FL 32210

SUBJECT: JAVIER ESCOBAR II, PA

Ref. Number: W99000016018

We have received your document for JAVIER ESCOBAR II, PA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

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

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) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 799A00035933

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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The name of the corporation shall be:

Javier Escobar II, P.A.

#### ARTICLE II PRINCIPAL OFFICE

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

4304 mc Girts Blud Sacksonville FL 32210

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one is is is in the number of shares of stock that this corporation is authorized to have outstanding at any one is in the number of shares of stock that this corporation is authorized to have outstanding at any one is in the number of shares of stock that this corporation is authorized to have outstanding at any one is in the number of shares of stock that this corporation is authorized to have outstanding at any one is in the number of shares of stock that this corporation is authorized to have outstanding at any one is in the number of shares of stock that the number of shares of stock that the number of shares of stock that the number of shares of sha

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### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Soren Brockdorf, CPA 4362 Kelnepa Drive Jacksonville, FL

#### ARTICLE V *INCORPORATOR*

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

Javier Escaber, I 4304 mc Girds Blod. Sacksonville, FL 32210

Signature/Incorporator

6.26.99

Date

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

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

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