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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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REGISTRAR OF STATE  
TALLAHASSEE, FLORIDA

3/11

WB-14180 96

**COVER LETTER**

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

**SUBJECT:** Tabetha M. Sibley P. A.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Tabetha Sibley

Name (Printed or typed)

4142 Mariner Blvd #229

Address

Spring Hill, FL 34609

City, State & Zip

352-397-4577

Daytime Telephone number

Tabells@yahoo.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2013 APR -1 PM 12:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 12, 2013

TABETHA SIBLEY  
4142 MARINER BLVD #229  
SPRING HILL, FL 34609

SUBJECT: TABETHA M. SIBLEY P.A.  
Ref. Number: W13000014180

We have received your document for TABETHA M. SIBLEY 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 business purpose of the professional association must be stated in the document.*

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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 (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 613A00005766

**COVER LETTER**

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

**SUBJECT:** Tabetha M. Sibley P.A.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy  
 \$87.50 Filing Fee, Certified Copy & Certificate of Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Tabetha M. Sibley

Name (Printed or typed)

4142 Mariner Blvd #229

Address

Spring Hill, FL 34609

City, State & Zip

352-428-2371

Daytime Telephone number

Tabells@yahoo.com

E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Tabetha M. Sibley P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

4142 Mariner Blvd #229

Spring Hill, FL 34609

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To provide Real Estate Services as a licensed real estate agent.

SECRETARY OF STATE  
13 APR - 1 PM 2:52  
TALLAHASSEE, FLORIDA

**ARTICLE IV SHARES 100**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Tabetha Sibley President Name and Title: \_\_\_\_\_

Address 4142 Mariner Blvd #229 Address: \_\_\_\_\_

Spring Hill, FL 34609 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Tabetha Sibley  
 Address: 4142 Mariner Blvd #229  
Spring Hill, FL 3469

13 APR -1 PM 12:52  
 DEPARTMENT OF STATE  
 TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Tabetha Sibley  
 Address: 4142 Mariner Blvd #229  
Spring Hill, FL 34609

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Tabetha Sibley 3/26/2013  
 Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Tabetha Sibley 3/26/2013  
 Required Signature/Incorporator Date