

P09000046226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

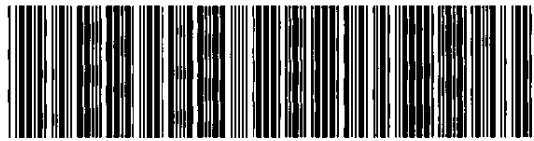
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
09 MAY 26 PM 2:43  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

SUBJECT: Land Lines, Inc.  
(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: Cheryl Zabryk  
Name (Printed or typed)

9290 SW 1 Street  
Address

Plantation, FL 33324  
City, State & Zip

954-618-7985  
Daytime Telephone number

CherylZ35@netzero.net  
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:

L & L Lines, Inc., (hereinafter, "Corporation").

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

9290 SW 1st Street  
Plantation, FL 33324

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is:

One thousand (1,000), each having the par value of one dollar (\$1.00)

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

List name(s), address(es) and specific title(s):

President: Liza Leas  
Secretary: Liza Leas

Treasurer: Cheryl Zakryk

**ARTICLE VI REGISTERED AGENT**

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

Cheryl Zakryk  
9290 SW 1st Street  
Plantation, FL 33324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Cheryl Zakryk  
9290 SW 1st Street  
Plantation, FL 33324

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent

5-13-09  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

5-13-09  
\_\_\_\_\_  
Date

Cheryl Zakryk