

P16000014368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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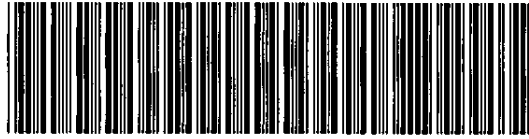
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
16 FEB -1 AM 10:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Gulligan FEB 15 2016

COVER LETTER

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

SUBJECT: Linda Ann Collins RA
(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 ☐ \$78.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Linda A Collins
Name (Printed or typed)

809 B Salem Lane
Address

Lake Worth, FL 33467
City, State & Zip

561-602-7307
Daytime Telephone number

linda9000@comcast.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)

FILED

ARTICLE I NAME

The name of the corporation shall be: LINDA ANN COLLINS

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ARTICLE II PRINCIPAL OFFICE

Principal street address

809B Salem Lane
Lake Worth, FL 33467

SECRETARY OF STATE
MAILING ADDRESS, IF DIFFERENT:
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Real Estate Transactions

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LINDA ANN COLLINS President

Address: 809B Salem Lane

Lake Worth, FL 33467

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Linda Ann Collins

Address: 809 B Salem Lane
Lake Worth FL 33467

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Linda Ann Collins

Address: 809 B Salem Lane
Lake Worth, FL 33467

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Linda Ann Collins

Required Signature/Registered Agent

1-27-2016

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.

Linda Ann Collins

Required Signature/Incorporator

1-27-2016

Date