

P17000001104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

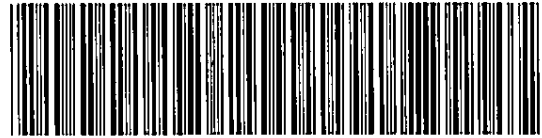
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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17 JAN -5 AM 9:09  
STATE OF FLORIDA  
TALLAHASSEE

W16-083492

01/06/17



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2016

SHAWN BROWN  
3023 BONAVENTURE CIR., #204  
PALM HARBOR, FL 34684

SUBJECT: 421 LIMO MANAGEMENT CORP.  
Ref. Number: W16000083492

We have received your document for 421 LIMO MANAGEMENT CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 the corrected 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) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 016A00026556

COVER LETTER

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

SUBJECT: 421 LIMO MANAGEMENT CORP.  
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: SHAWN BROWN  
Name (Printed or typed)

3025 BONAVENTURE CIRCLE #204  
Address

PALM HARBOR FL 34684  
City, State & Zip

727-946-3330  
Daytime Telephone number

SHAWN13564@GMAIL.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: 421 LIMO MANAGEMENT CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address: 3025 BONAVENTURE CIR  
#204  
PALM HARBOR FL 34684

Mailing address, if different is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: BUSINESS & TAXES

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 100

17 JAN - 5 AM 9:09  
TALLAHASSEE FLORIDA

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

Name and Title: SHAWN BROWN / PRESIDENT Name and Title: \_\_\_\_\_  
Address: 3025 BONAVENTURE CIR Address: \_\_\_\_\_  
#204  
PALM HARBOR FL 34684

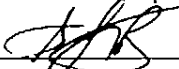
Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
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Name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

**ARTICLE VI REGISTERED AGENT**

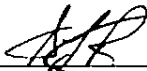
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: SHAWA BROWN   
Address: 3025 BANAVENTURE LITTLE #204  
PALM HARBOR FL 34684

17 JAN -5 AM 9:09  
HLL  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

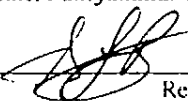
Name: SHAWA BROWN   
Address: 3025 BANAVENTURE LITTLE #204  
PALM HARBOR FL 34684

**ARTICLE VIII EFFECTIVE DATE:**

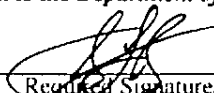
Effective date, if other than the date of filing: 12/7/16 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**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*

\_\_\_\_\_  
 Required Signature/Registered Agent 12/7/16  
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.*

\_\_\_\_\_  
 Required Signature/Incorporator 12/7/16  
Date