

F080000001390

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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W08-137K2

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03/13/08--01005--003 \*\*70.00

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08 MAR 28 PM 4:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** LHF, inc

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Linda Bammann

(Name of Person)

LHF, inc

(Firm/Company)

9295 NW Highway 225A

(Address)

Ocala, FL 34482

(City/State and Zip code)

For further information concerning this matter, please call:

Linda Bammann

(Name of Person)

at (352) 629-4445

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 14, 2008

LINDA BAMMANN  
LHF, INC.  
9295 NW HIGHWAY 225A  
OCALA, FL 34482

SUBJECT: LHF, INC.  
Ref. Number: W08000013718

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

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1,150.00.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6934.

Loria Poole  
Regulatory Specialist II

Letter Number: 408A00015747

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. LHF, inc  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

LHFarm, Inc.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Alabama 3. 68-0586686  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 27<sup>th</sup>, 2004 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 5/14/07  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 9295 NW Hwy 225A Ocala, FL 34482  
(Principal office address)  
9295 NW Hwy 225A Ocala, FL 34482  
(Current mailing address)

8. a) to engage in lawful activities for corporations b) to engage in purchasing + sell real estate  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Binda Bammann

Office Address: 9295 NW Hwy 225A  
Ocala, Florida 34482  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: None

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

Vice Chairman: None

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

Director: Linda Bammann | Paul Terzani

Address: 9295 NW Hwy 225A | 9295 NW Hwy 225A  
Ocala, FL 34482 | Ocala

Director: Paul Terzani

Address: 9295 NW Hwy 225A  
Ocala, FL 34482

**B. OFFICERS**

President: Paul Terzani

Address: 9295 NW Hwy 225A  
Ocala, FL 34482

Vice President: \_\_\_\_\_

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

Secretary: Linda Bammann

Address: 9295 NW Hwy 225A Ocala, FL 34482

Treasurer: Linda Bammann

Address: 9295 NW Hwy 225A Ocala, FL 34482

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. [Signature]

(Signature of Director or Officer listed in number 12 of the application)

14. Paul Terzani

(Typed or printed name and capacity of person signing application)

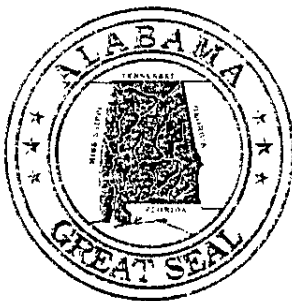
Beth Chapman  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporation records on file in this office disclose that LHF, Inc. incorporated in Lauderdale County, Florence, Alabama on June 2, 2004. I further certify that the records do not disclose that said LHF, Inc. has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

February 28, 2008

Date

*Beth Chapman* *spc*

Beth Chapman

Secretary of State