

**P03000050686**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

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


☐ PICK-UP    ☐ WAIT    ☐ MAIL

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

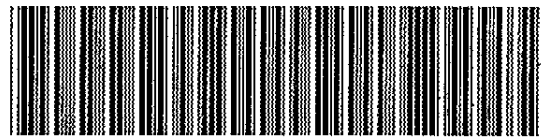
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: Lantana Gift Services, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUTEX)

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: Ann Chauvin

Name (Printed or typed)

4212 Wharton Way

Address

Land O'Lakes, FL 34639-6439

City, State & Zip

Daytime Telephone number

**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:

Lantana Gift Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

4212 Wharton Way  
Land O'Lakes, FL 34639-6439

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Retail Sales

**ARTICLE IV SHARES**

The number of shares of stock is:

100 Shares

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s):

Ann Chauvin, President  
4212 Wharton Way  
Land O'Lakes, FL 34639-3439

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Paul D. Tyler  
3338 Foxridge Circle  
Tampa, FL 33618

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Ann Chauvin  
4212 Wharton Way  
Land O'Lakes, FL 34639-6439

\*\*\*\*\*  
*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

4/29/2003

Date



Signature/Incorporator

4/29/2003

Date

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03 MAY -1 AM 8:56  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA