

P03000098565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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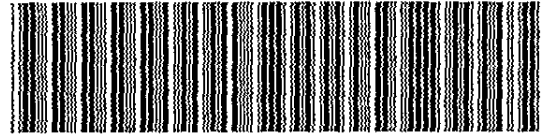
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TS  
9/9/03

## TRANSMITTAL LETTER

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

**SUBJECT: ELEGANT REFLECTIONS INC.**

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

LESLIE L. TOTTEN

Name (Printed or typed)

2805 TAMiami TRAIL

Address

PUNTA GORDA, FL 33950

City, State & Zip

941-639-0680

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:

**ELEGANT REFLECTIONS INC.**

**ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**410 SE 31<sup>ST</sup> STREET  
CAPE CORAL, FL 33904**

**ARTICLE III      SHARES**

The number of shares of stock is:

**1000 SHARES**

**ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

**LESLIE TOTTEN  
2805 TAMIAMI TRAIL  
PUNTA GORDA, FL 33950**

**ARTICLE V      INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

**HOLLY HENRI  
410 SE 31<sup>ST</sup> STREET  
CAPE CORAL FL 33904**

\*\*\*\*\*  
*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*

*Leslie L. Totten EA*  
Signature/Registered Agent

\_\_\_\_\_  
Date

*Holly Henri*  
Signature/Incorporator

\_\_\_\_\_  
Date

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA