704000028592

(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:				
Special instructions to Fining Officer.				

Office Use Only



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01/23/04--01056--007 **78.75



TRANSMITTAL LETTER

2

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314					
SUBJECT: Lorrgine Bareis (PROPOSED CORPORA)	55, Inc. TENAME-MUSTINCL	UDE SUFFIX)			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
1 570.00 □ \$78.75	1 \$78.75	□ \$87.50			
Filing Fee Filing Fee	Filing Fee	Filing Fee,			
& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status			
	ADDITIONAL COPY REQUIRED				
FROM: Lorraine J. Bare 155 Name (Printed or typed)					
1506 S.W. 2200 Ave.					
Boynton Brock, FL 33426 City, State & Zip					
561-732-8591 Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 3, 2004

LORRAINE J. BAREISS 1506 SW 22ND AVE BOYNTON BCH, FL 33426

SUBJECT: LORRAINE BAREISS, INC.

Ref. Number: W04000004678

We have received your document for LORRAINE BAREISS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return the 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) 245-6925.

Letter Number: 904A00007200

Cynthia Blalock Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

	ANTICLES OF ETCORTORATION		
	In compliance with Chapter 607 and/or Chapter 621, F.S	. (Profit)	EU ED
	ARTICLE I NAME	a -	FILED
,	The name of the corporation shall be: Lorraine	Jareiss, 200	04 FEB 12 PM 3: 56
•			SECRETARY OF STATE
Ŧ	ARTICLE II PRINCIPAL OFFICE		TALLAHASSEE, FLORIDA
	The principal place of business/mailing address is: 150	65.W. 22NO	Age.
	7,	who Reach	امير
	Uey	inton Beach	7-2030
	ARMINI WITH MITTURGES		33426
	The purpose for which the corporation is organized is:		
	Martage w Per Lan	Sarvinge	
	Mortgage « Realtor.	06171663	
	·		
	The number of shares of stock is:		
	THE HUMBER OF STREETS OF STOCK IS. ON		
	ARTICLE 7 HITLL OFFICERS AND/OR DI		•
	List name(s), address(es) and specific title(s):	. / . /	1 20 .
	Lorraine J. War	12155 A1	ottices)
	1506 5W 22NO	Aug	
	List name(s), address(es) and specific title(s): Lorraine J. Bar 1506 5 av 22 NO Boynton Beack	, FL 334.	26
	ARTICLE VI REGISTERED AGENT	•	
	The name and Florida street address of the registered so	ent is:	
	Larvaine V. Barciss	on 15.	
	Lorraine V. Bare 155 1506 SW JSNO Ave.		
	Boynton Beach, FL 33	421	
	ARTICLE VIL INCORPORATOR		
	THE STATE OF THE S		
	Lawraine V GA	re155	
	doynton Beach	me,	
	Doynton Beach	1, FL 3342	<u>,</u>
	*************	**********	*********
	Having been named as registered agent to accept service of process vertificate, I am familiar with and accept the appointment as registere	for the above stated corporation dagent and agree to act in this	t al the place designated in this capacity
		· ·	-
	ortaine driess		Z-6-04 Date
	Signature/Registered Agent		Date
	P. AB		
	Signature/Incorporator		Date
	Signature/incorporator		Date