Po400035234

| • | | |
|-------------------------|--------------------|-----------|
| (Re | equestor's Name) | |
| (Ad | (dress) | |
| (Ad | (dress) | |
| (Cit | ty/State/Zip/Phons | ; #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | , |
| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



100027908051

02/02/04--01079--002 **78.75

OU FEB 23 PM 1:32

المال المال

TRANSMITTAL LETTER

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

| SUBJECT: Milto | on's Place, Inc. | | | | |
|--------------------------|--|--|--|--------------|---|
| | (PROPOSED CORPORA) | E NAME – <u>MUST INCL</u> | UDE SUFFIX) | - ; | - |
| Enclosed are an original | ginal and one (1) copy of the artic | les of incorporation and | l a check for: | | |
| ☐ \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED | | |
| FROM: M | lilton Lawrence | | | | |
| | Name (| Printed or typed) | | ٠. سعد ١ - ١ | |
| | 2208 Lomax Drive | ddress | | ٠. | : |
| | Fruitland Park, Fl. 34731 | State & Zip | | ers of the | |
| | City, S | state & Zip | | | |
| | (352) 787-1616 | | | | |
| | Daytime Te | lephone number | | | |

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 10, 2004

MILTON LAWRENCE 2208 LOMAX DRIVE FRUITLAND PARK, FL 34731

SUBJECT: MILTON'S PLACE, INC. Ref. Number: W04000005447

We have received your document for MILTON'S PLACE, 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) 245-6962.

Valerie Ingram Document Specialist New Filings Section

Letter Number: 104A00008872

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

EU ED

ARTICLE I NAME

The name of the corporation shall be:

Milton's Place, Inc.

04 FEB 23 PM 1: 32

CLORETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 708 South 14th Street, Leesburg, Fl. 34748

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Milton C. Lawrence, 2208 Lomax Dr., Fruitland Park, Fl 34731, President/Secretary Linda B. Lawrence, 2208 Lomax Dr., Fruitland Park, Fl. 34731, Vice-President/Treasuary

ARTICLE VI REGISTERED AGENT

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

Linda B. Lawrence 2208 Lomas Drive Fruitland Park, Fl. 34731

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Linda B. Lawrence, 2208 Lomax Dr., Fruitland Park, Fl. 34731

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

LINCAD B. C. 210104

Signature/Registered Agent

O1/29/04

Signature/Incorporator

Date