

P04000045473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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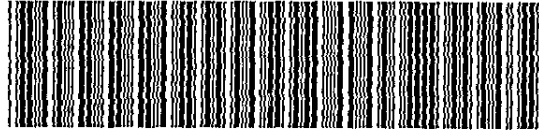
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/20/04 --01034--021 **78.75

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04 MAR 12 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TH 3/12/04

TRANSMITTAL LETTER

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

SUBJECT: A & J SIGN COMPANY
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee
	& Certificate of Status

<input checked="" type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

FROM: LIONEL LEGAGNEUR
Name (Printed or typed)

19545 SEDGEFIELD TERRACE
Address

BOCA RATON, FL 33498
City, State & Zip

(561) 483-0334
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 25, 2004

LIONEL LEGAGNEUR
19545 SEDGEFIELD TERRACE
BOCA RATON, FL 33498

SUBJECT: A & J SIGN COMPANY
Ref. Number: W04000007971

RECEIVED
04 MAR 12 PM 3:29
TALLAHASSEE, FLORIDA

We have received your document for A & J SIGN COMPANY 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

The document number of the name conflict is P97000067582.

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) 245-6855.

Tammy Hampton
Document Examiner
New Filings Section

Letter Number: 404A00012762

*Submit Org
online Searches*

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

The name of the corporation shall be:

FILED

04 MAR 12 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2819 ORANGE GROVE TRAIL
NAPLES, FL 34120

The purpose for which the corporation is organized is:

The number of shares of stock is:

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

MONIQUE SAJOUS - 2819 ORANGE GROVE TRAIL NAPLES, FL 34120 - SECRETARY

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

The name and address of the Incorporator is:

 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

Date _____

Date _____