

P0400117675

(Requestor's Name)

(Address)

(Address)

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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: LAWRENCE IMPROVEMENTS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: VICKI LAWRENCE  
Name (Printed or typed)

1904 CRYSTAL GROVE DRIVE  
Address

LAKELAND, FL 33801  
City, State & Zip

863-698-2485  
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:

LAWRENCE IMPROVEMENTS, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1904 CRYSTAL GROVE DRIVE  
LAKELAND, FLORIDA 33801

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO START A BUSINESS

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESIDENT VICKI LAWRENCE - 1904 CRYSTAL GROVE DRIVE - LAKELAND FL 33801  
TREASURER ROY LAWRENCE - 1904 CRYSTAL GROVE DRIVE - LAKELAND, FL 33801

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

VICKI LAWRENCE  
1904 CRYSTAL GROVE DRIVE  
LAKELAND, FL 33801

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VICKI LAWRENCE  
1904 CRYSTAL GROVE DRIVE  
LAKELAND, FL 33801

\*\*\*\*\*

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

Vicki Lawrence

Signature/Registered Agent

8-1-04

Date

Vicki Lawrence

Signature/Incorporator

8-1-04

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA