

P05000092031

(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:

Office Use Only



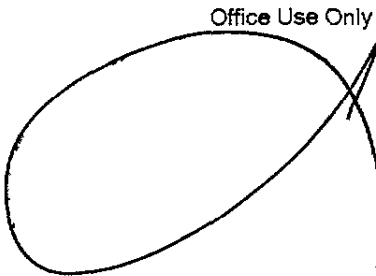
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05 JUN 27 PM 1:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06/27/05--01043--001 **70.00

 6/28/05

TRANSMITTAL LETTER

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

SUBJECT:

Luanne Winick PA

(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:

Luanne Winick

Name (Printed or typed)

840 NW 121st ave

Address

Plantation Florida 33325

City, State & Zip

(954) 298-0030

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:

Luanne Winick PA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

840 NW 121st ave, Plantation, FL 33325

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Realestate Sales

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):

Luanne Winick President/Director
840 NW 121st ave Plant

ARTICLE VI REGISTERED AGENT

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

Luanne Winick 840 NW 121st ave Plantation, FL 33325

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Luanne Winick 840 NW 121st ave Plantation, FL 33325

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

Luanne Winick
Signature/Registered Agent

6/8/05
Date

Luanne Winick
Signature/Incorporator

6/8/05
Date

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TALLAHASSEE, FLORIDA