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05 AUG -8 AM 8:21

SECRETARY OF THE ARMY

## TRANSMITTAL LETTER

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

SUBJECT: L.J.S. Rehabilitative Services 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: Lonnie Scott

Name (Printed or typed)

711 Sherwood Terr Dr #303

Address

Orlando, Florida 32818

City, State & Zip

321-202-0933

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 29, 2005

LONNIECE J. SCOTT  
711 SHERWOOD TERRACE DRIVE #303  
ORLANDO, FL 32818

SUBJECT: L.J.S. SERVICES INC.  
Ref. Number: W05000035885

RECEIVED

05 AUG -8 AM 7:55

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for L.J.S. SERVICES 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 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.**

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) 245-6965.

Dorine Martin  
Document Specialist  
New Filings Section

Letter Number: 605A00049222

# ARTICLES OF INCORPORATION

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

FILED

05 AUG -8 AM 8:21

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

L.J.S. Rehabilitative Services Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

711 Sherwood Terrace Drive #303  
Orlando, Florida 32818

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide assistance, support, training, and aid to persons with developmental disabilities.

## ARTICLE IV SHARES

The number of shares of stock is:

100 shares

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Lonniece Scott  
711 Sherwood Terrace Drive #303  
Orlando, Florida 32818  
President/Secretary

## ARTICLE VI REGISTERED AGENT

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

Lonniece Scott  
711 Sherwood Terrace Drive #303  
Orlando, Florida 32818


## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lonniece Scott  
711 Sherwood Terrace Drive #303  
Orlando, Florida 32818

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent

8/5/05  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

8/5/05  
\_\_\_\_\_  
Date