

P0600006332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

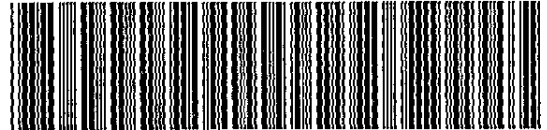
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED

2006 MAY - 1 PM 3:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Hampton MAY - 1 2006

**COVER LETTER**

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

SUBJECT: L + M ADJUSTING CO.  
(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: MICHAEL J. ZAKRZEWSKI  
Name (Printed or typed)

674 MERIONETH DR. NE.  
Address

FORT WALTON BEACH FL. 32547  
City, State & Zip

850-218-9844

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)

**FILED**

2006 MAY -1 PM 3:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

L + M ADJUSTING CO.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

674 MERIONETH DR. NE.  
FORT WALTON BEACH FL. 32547

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

INSURANCE ADJUSTER

**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):

MICHAEL J. ZAKRZEWSKI (PRES)  
674 MERIONETH DR. NE.  
FORT WALTON BEACH FL 32547

**ARTICLE VI REGISTERED AGENT**

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


MICHAEL J. ZAKRZEWSKI  
674 MERIONETH DR. NE.  
FORT WALTON BEACH FL. 32547

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

MICHAEL J. ZAKRZEWSKI  
674 MERIONETH DR. NE.  
FORT WALTON BEACH FL. 32547

\*\*\*\*\*  
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

4-27-06

Date



Signature/Incorporator

4-27-06

Date

MICHAEL J. ZAKRZEWSKI