

PO6888076324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

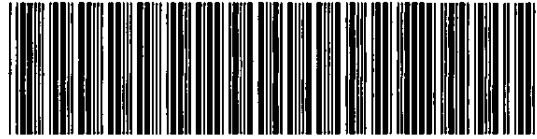
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 JUN - 1 P 3:53

FILED

6-2-06
MC

COVER LETTER

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

SUBJECT: LORRAINE ANN FARLEY, 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: LORRAINE ANN FARLEY
Name (Printed or typed)

1003 EAST 15TH COURT
Address

STUART, FLORIDA 34996
City, State & Zip

772-287-2368
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:

LORRAINE ANN FARLEY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1003 E. 15TH COURT, STUART, FL 34996

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALE OF PROPERTY

ARTICLE IV SHARES

The number of shares of stock is:

- ONE -

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LORRAINE ANN FARLEY PRESIDENT
1003 E. 15TH COURT
STUART, FL 34996

ARTICLE VI REGISTERED AGENT

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

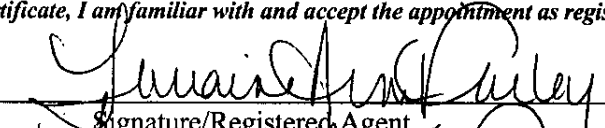
LORRAINE ANN FARLEY
1003 E. 15TH COURT
STUART, FL 34996

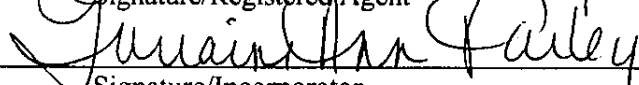
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LORRAINE ANN FARLEY
1003 E. 15TH COURT
STUART, FL 34996

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


Signature/Incorporator


Date


Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA