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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Lunsford Works Division 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:** Emily S. Lunsford

Name (Printed or typed)

6633 Fairview Street

Address

Fort Myers, FL 33966

City, State & Zip

239-872-2358

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:

Lunsford Works Division Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6633 Fairview Street  
Fort Myers, FL 33966

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

A for profit janitorial company

## **ARTICLE IV SHARES**

The number of shares of stock is:

10,000 shares

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Emily S. Lunsford 6633 Fairview Street, Fort Myers, FL 33966 President/Secretary  
James F. Lunsford 6633 Fairview Street, Fort Myers, FL 33966 Vice President

## **ARTICLE VI REGISTERED AGENT**

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

Emily Lunsford 6633 Fairview Street, Fort Myers, FL 33966

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Emily Lunsford 6633 Fairview Street, Fort Myers, FL 33966

\*\*\*\*\*

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

12-11-06  
\_\_\_\_\_  
Date

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

12-11-06  
\_\_\_\_\_  
Date

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