# P0700112758

(Re	questor's Name)	- NO-VA	
(Ad	dress)		
(Ad	dress)		
(Cit	ry/State/Zip/Phone	:#)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



800110591468

10/11/07--01038--017 \*\*87.50

O7 OCT II MI 9: 28
SECRETARY OF STATE
IALLAHASSEE, FLORET

KS 10/15/07

# **COVER LETTER**

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

SUBJECT: Lake	front Maintenance, Inc. (PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	✓ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:		/Ce Cox e (Printed or typed)	
	1981 Nort	h County Road 42	26
		), Fl. 32765 , State & Zip	
		359-0533 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:

# Lakefront Maintenance, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1981 North County Road 426 Oviedo, Fl. 32765

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

# ARTICLE IV SHARES

The number of shares of stock is:

10

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joyce Cox 1981 North County Road 426 Oviedo, Fl. 32765 FILED

07 OCT 11 AM 9: 23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Joyce Cox	
1981 North County Road 426	
Oviedo, Fl. 32765	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	<del>। व</del>
Joyce Cox	
1981 North County Road 426	
Oviedo, Fl. 32765	
******************	***********
Having been named as registered agent to accept service of process for the ab certificate, I am familiar with and accept the appointment as registered agent an	
Dougle Cap	10.5.07
Signature/Registered Agent	Date
Louce Cal	10.5.07 Date
Signature/Incorporator	Date

ARTICLE VI REGISTERED AGENT

O7 OCT II AM 9: 23 SECRETARY OF STATE