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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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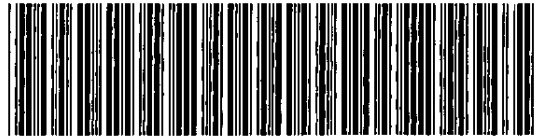
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Dale White*  
1/8/08

## COVER LETTER

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

SUBJECT: S. L. Alekman Associates, 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: Alice Alekman  
Name (Printed or typed)

9840 Isles Cay Drive

Address

Delray Beach FL 33446

City, State & Zip

561-496-4679

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:

**S. L. Alekman Associates, Inc.**

## **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailing address is:

9840 Isles Cay Drive  
Delray Beach, FL 33446

## **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Consulting on Business and Training

## **ARTICLE IV      SHARES**

The number of shares of stock is:

100,000

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

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

Stanley L. Alekman, President  
9840 Isles Cay Drive  
DelRay Beach, FL 33446

Alice Alekman , Secretary and Treasurer  
9840 Isles Cay Drive  
DelRay Beach, FL 33446

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**ARTICLE VI REGISTERED AGENT**

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

Alice Alekman , Secretary and Treasuer  
9840 Isles Cay Drive  
DelRay Beach, FL 33446

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Alice Alekman , Secretary and Treasuer  
9840 Isles Cay Drive  
DelRay Beach, FL 33446

\*\*\*\*\*

*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*

Alice F. Alekman  
Signature/Registered Agent

12-24-07  
Date

Alice F. Alekman  
Signature/Incorporator

12-24-07  
Date

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TALLAHASSEE, FLORIDA