

P08.000/06355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

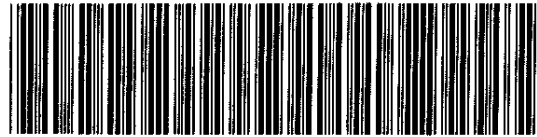
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 DEC -5 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SP 12/8/08

COVER LETTER

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

SUBJECT: Lou Ann Weeks, 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: Lou Ann Weeks
Name (Printed or typed)

2104 Lionel DR.
Address

Melbourne, FL 32940
City, State & Zip

321-794-8157
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION
FOR
Lou Ann Weeks, Inc.**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as Incorporators of a corporation under the Florida Business Corporation Act, adopt the following Articles of Incorporation for such corporation:

1. **Name.** The name of this corporation is **Lou Ann Weeks, Inc.**
2. **Duration.** The period of its duration is perpetual.
3. **Purpose.** The purpose is to engage in any activities or business permitted under the laws of the United States and State of Florida.
4. **Capital Stock.** The corporation is authorized to issue 10,000 (ten thousand) shares, all of voting Common Stock having a par value of one cent (\$0.01) per share.
5. **Initial Registered Office and Agent and the Principle Office.** The name and address of the initial registered agent and office and the principle office of this corporation is as follows:

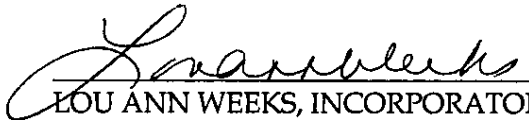
Lou Ann Weeks
2104 Lionel Drive
Melbourne, FL 32940
6. **Initial Board of Directors.** This corporation shall have one director initially. The number of directors may be either increased or decreased from time to time by an amendment of the bylaws of the corporation in the manner provided by law, but shall never be less than one. The name and address of the initial director of this corporation are:

Lou Ann Weeks
2104 Lionel Drive
Melbourne, FL 32940
7. **Incorporators.** The name and address of the Incorporator signing these Articles of Incorporation are:

Lou Ann Weeks
2104 Lionel Drive
Melbourne, FL 32940

8. **Indemnification of Directors and Officers and Employees.** This corporation shall to the fullest extent permitted by Florida Statute Section 607.0850, as the same may be amended and supplemented, indemnify any and all persons whom it shall have power to indemnify under said section from and against any and all of the expenses, liabilities or other matters referred to in or covered by said section, and the indemnification provided for herein shall not be deemed exclusive of any other rights to which those indemnified may be entitled under any Bylaw, agreement, vote of stockholders or disinterested directors or otherwise, both as to action in his official capacity and as to action in another capacity while holding such office, and shall continue as to a person who has ceased to be a director, officer, employee or agent and shall inure to the benefit of the heirs, executors and administrators of such a person.
9. **Amendment of Articles.** The power to adopt, alter, amend or repeal the Articles of Incorporation of this corporation shall be vested in the Shareholders by a sixty-seven percent (67%) vote.

IN WITNESS WHEREOF, the undersigned Incorporator has executed these Articles of Incorporation, this 1st day of December 2008.


LOU ANN WEEKS, INCORPORATOR


LOU ANN WEEKS, REGISTERED AGENT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING AGENT UPON WHOM PROCESS
MAY BE SERVED AND THE PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN
THE STATE OF FLORIDA**

Pursuant to Chapters 48.091 and 607.0501, Florida Statutes, the following is submitted:

LOU ANN WEEKS, INC., desiring to organize under the laws of the State of Florida with its initial registered office as indicated in the Articles of Incorporation, at Melbourne, Florida and, County of Brevard, State of Florida, has named Lou Ann Weeks as its registered agent to accept service of process within this state.

Having been named as the registered agent for the above corporation for the purpose of accepting service of process at the registered office designated in this certificate, I hereby accept such appointment and acknowledge that I am familiar with and accept the obligations and responsibilities of such office as provided for in Florida Statutes 607.0505


LOU ANN WEEKS, REGISTERED AGENT

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TALLAHASSEE, FLORIDA