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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB -9 2010  
D.A. WHITE

## COVER LETTER

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

SUBJECT: LINDSAY'S ENTERPRISES 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: LEROY E. LINDSAY  
Name (Printed or typed)

2021 IMPERIAL EAGLE PLACE  
Address

KISSIMMEE FLORIDA 34746  
City, State & Zip

407-201-5180  
Daytime Telephone number

lindsay.lercy@gmail.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 29, 2010

LEROY E. LINDSAY  
2021 IMPERIAL EAGLE PLACE  
KISSIMMEE, FL 34746

SUBJECT: LINDSAY'S ENTERPRISES INC  
Ref. Number: W10000004696

We have received your document for LINDSAY'S ENTERPRISES INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

You must list at least one incorporator with a complete business street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6933.

Dale White  
Regulatory Specialist II  
New Filing Section

Letter Number: 410A00002423

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**FILED**

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**ARTICLE I NAME**

The name of the corporation shall be:

LINDSAY'S INTERNATIONAL ENTERPRISES INC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

2021 IMPERIAL EAGLE PL., KISSIMMEE, FLORIDA 34746

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LEGAL BUSINESSES

**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):

LEROY E. LINDSAY – DIRECTOR; WINSOME D LINDSAY – SECRETARY AND  
FINANCIAL OFFICER; 2021 IMPERIAL EAGLE PL. KISSIMMEE, FLORIDA 34746

**ARTICLE VI REGISTERED AGENT**

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

LEROY E LINDSAY,  
2021 IMPERIAL EAGLE PL, KISSIMMEE, FLORIDA 34746

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LEROY E. LINDSAY,  
2021 IMPERIAL EAGLE PL. KISSIMMEE, FLORIDA 34746

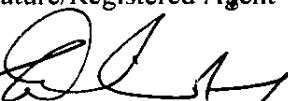
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

02/02/2010

\_\_\_\_\_  
Date

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

02/02/2010

\_\_\_\_\_  
Date