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11

## COVER LETTER

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

SUBJECT: L B Towing & Recovery, 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

|   |   |
|---|---|
| <input type="checkbox"/> \$78.75 Filing Fee<br>& Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,<br>Certified Copy<br>& Certificate of<br>Status |
| <b>ADDITIONAL COPY REQUIRED</b>                                 |   |

FROM: Lawrence E. Brown

Name (Printed or typed)

3220 N. W. 14th Street

Address

Fort Lauderdale, Florida 33311

City, State & Zip

954-830-1360

Daytime Telephone number

brevon5 @ bellsouth.net

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

December 13, 2010

LAWRENCE E. BROWN  
3220 N.W. 14TH STREET  
FORT LAUDERDALE, FL 33311

SUBJECT: L B TOWING & RECOVERY, INC.  
Ref. Number: W10000057572

We have received your document for L B TOWING & RECOVERY, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

|                              |         |
|------------------------------|---------|
| Filings Fees:                | \$35.00 |
| Registered Agent Designation | \$35.00 |
| Certified Copy               | \$8.75  |
| Certificate of Status        | \$8.75  |

An effective date may be added to the Articles of Incorporation if a 2011 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 810A00028795

# 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: L B Towing & Recovery, Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3220 N. W. 14th Street  
Fort Lauderdale, FL 33311

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation is organized for the purpose of engaging in any activity or business permitted under the laws of the State of Florida.

## ARTICLE IV SHARES

The number of shares of stock is: SEVEN THOUSAN FIVE HUNDRED(7,500) SHARES  
of Common Stock having a Nominal or Par Value of ONE DOLLAR (\$1.00) per share.

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lawrence E. Brown, President  
Address: 3220 N. W. 14th Street  
Fort Lauderdale, FL 33311

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: Brenda E. Brown, Secretary  
Address: 3220 N. W. 14th Street  
Fort Lauderdale, FL 33311

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

## ARTICLE VI REGISTERED AGENT

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

Name: Lawrence E. Brown  
Address: 3220 N. W. 14th Street  
Fort Lauderdale, FL 33311

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lawrence E. Brown  
Address: 3220 N. W. 14th Street  
Fort Lauderdale, FL 33311

*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*

Lawrence E. Brown

Required Signature/Registered Agent

12/06/2010

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Lawrence E. Brown

Required Signature/Incorporator

12/06/2010

Date

APPROVED  
AND  
FILED

10 DEC 21 PM 3:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA