

P11000004755

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☐ PICK-UP

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Office Use Only



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12/30/10--01033--011 **78.75

WMA-66

FILED

2011 JAN 13 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JAN 14 2011

COVER LETTER

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

SUBJECT: LIPPS LANDSCAPE, 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: William Lipps
Name (Printed or typed)

1106 Broken Oak Dr.
Address

Wildwood, FL 34785
City, State & Zip

(352) 516-8990
Daytime Telephone number

LIPPSLANDSCAPE@hotmail.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

RECEIVED

11 JAN 13 PM 2:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 3, 2011

WILLIAM LIPPS
1106 BROKEN OAK DR
WILDWOOD, FL 34785

SUBJECT: LIPPS LANDSCAPE, INC.
Ref. Number: W11000000066

We have received your document for LIPPS LANDSCAPE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 111A00000061

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: LIPPS LANDSCAPE, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

1106 Broken Oak Dr.
Wildwood, FL 34785

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Legal & Tax purposes

ARTICLE IV SHARES

The number of shares of stock is: ~~1000~~ 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Lipps, President

Address: 1106 Broken Oak Dr.
Wildwood, FL 34785

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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: William Lipps

Address: 1106 Broken Oak Dr.
Wildwood FL 34785

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Lipps

Address: 1106 Broken Oak Dr.
Wildwood FL 34785

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


Required Signature/Registered Agent

12.23.10

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.


Required Signature/Incorporator

12.23.10

Date

FILED

2011 JAN 13 PM 4:41

STATE OF FLORIDA
DEPARTMENT OF STATE