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**COVER LETTER**

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

SUBJECT: LUCY McLENDON DESIGNS, 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: LUCY C. McLENDON  
Name (Printed or typed)  
900 EAST MOORE ST.  
Address  
PENSACOLA, FL 32503  
City, State & Zip  
850 433-7475  
Daytime Telephone number  
lucy@mcclendoninteriors.com  
E-mail address: (to be used for future annual report notification)

**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: LUCY McLENDON DESIGNS, INC.

**ARTICLE II - PRINCIPAL OFFICE**

Principal street address

900 EAST MORENO ST.  
PENSACOLA, FL 32503

Mailing address, if different from principal street address

**ARTICLE III - PURPOSE**

The purpose for which the corporation is organized is:

INTERIOR DESIGN

**ARTICLE IV - SHARES**

The number of shares of stock is: 100 AT \$1.00 PAR VALUE.

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

Name and Title: LUCY C. McLENDON  
Address: 900 EAST MORENO ST.  
PENSACOLA, FL 32503

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: LUCY C. McLENDON  
Address: 900 EAST MORENO ST.  
PENSACOLA, FL 32503

**ARTICLE VII - INCORPORATOR**

The name and address of the Incorporator is:

Name: LUCY C. McLENDON  
Address: 900 EAST MORENO ST.  
PENSACOLA, FL 32503

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

LUCY C. McLENDON  
Required Signature/Registered Agent

2-22-11  
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.

LUCY C. McLENDON  
Required Signature/Incorporator

2-22-11  
Date

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