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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

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

| SUBJECT: Linchpin Marketing, Inc | |
|--|---|
| (PROPOSED CORPORA | TE NAME – <u>MUST INCLUDE SUFFIX</u>) |
| Enclosed are an original and one (1) copy of the artic | cles of incorporation and a check for: |
| \$70.00 Filing Fee & Certificate of Status PICEVIOUS LY PAID | \$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED |
| Sce letter # 111 A 0000 | 7067 |
| FROM: Jeffrey C. Lemon | (Printed or typed) |
| 116 Pine Circle Drive | |
| | ddress |
| Lake Mary, FL 32746 | State & Zip |
| 407-333-0644 Daytime Te | lephone number |
| jlemon1@cfl.rr.com E-mail address: (to be used | for future annual report notification) |

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



March 23, 2011

JEFFERY C. LEMON 116 PINE CIRCLE DRIVE LAKE MARY, FL 32746

SUBJECT: ATLANTIC MARKETING COMPANY

Ref. Number: W11000016510

We have received your document for ATLANTIC MARKETING COMPANY and your check(s) totaling \$78.75. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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

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) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 111A00007067



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 27, 2011

JEFFERY C. LEMON 116 PINE CIRCLE DRIVE LAKE MARY, FL 32746

SUBJECT: LINCHPIN MARKETING, INC.

Ref. Number: W11000016510

HAY 12 PH 12: 30

We have received your document for LINCHPIN MARKETING, 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):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6921.

Maryanne Dickey
Regulatory Specialist II Supervisor
New Filing Section

Letter Number: 111A00007067

May 9, 2011

Ms. Maryanne Dickey Regulatory Specialist II Supervisor New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Ref: Letter 111A00007067

Dear Ms. Dickey,

Thanks for your reply on my Articles of Incorporation for Linchpin Marketing Company.

Please find enclosed my new application for Linchpin Marketing, Inc. It will replace the one without corporate shares (copy also enclosed).

If approved, please apply the fees paid earlier against this new entity.

Thank you!

Cordially,

Jeffrey C. Lemon

11 MAY 12 PM 12: 30 SECRETARY OF STATI FALLAHASSEE, FLORII

cate, w

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

| ARTICLE II F | | | |
|--|--|---|---|
| | PRINCIPAL OFFICE Principal street address | Mailing address | s, if different is: |
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| | ke Mary, FL 32746 | | · · · · · · · · · · · · · · · · · · · |
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| ARTICLE III P | | | 至所 之 |
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| The number of shares | | | "Par |
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| | NITIAL OFFICERS AND/OR DIRECT | | |
| | Jeffrey C. Lemon, President | | |
| Address: | 116 Pine Circle Drive | | |
| | Lake Mary, FL 32746 | | |
| | | | |
| | e: | Name and Title: | |
| Address: | | Address: | |
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| Name and Title | e; | Name and Title: | |
| Address: | | Address: | |
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| ARTICLE VI R | EGISTERED AGENT | | |
| | da street address (P.O. Box NOT acceptable | e) of the registered agent is: | |
| and Florid | | | |
| The <u>name and Flori</u> Name: | Jeffrey C. Lemon | · | |
| | Jeffrey C. Lemon | | |
| Name: | | | |
| Name: Address: | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 | | |
| Name: Address: ARTICLE VII I | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR | | |
| Name: Address: ARTICLE VII I | Jeffrey C, Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: | | |
| Name: Address: ARTICLE VII II The name and addre | Jeffrey C, Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C, Lemon | | |
| Name: Address: ARTICLE VII II The name and addre Name: | Jeffrey C, Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C, Lemon 116 Pine Circle Drive | | |
| Name: Address: ARTICLE VII II The name and addre Name: Address: | Jeffrey C, Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR Sess of the Incorporator is: Jeffrey C, Lemon 116 Pine Circle Drive Lake Mary, FL 32746 | | on at the place designated in |
| Name: Address: ARTICLE VII II The name and addre Name: Address: Having been named | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 as registered agent to accept service of pro- | ocess for the above stated corporation | |
| Name: Address: ARTICLE VII II The name and addre Name: Address: Having been named | Jeffrey C, Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR Sess of the Incorporator is: Jeffrey C, Lemon 116 Pine Circle Drive Lake Mary, FL 32746 | ocess for the above stated corporation | this capacity |
| Name: Address: ARTICLE VII II The name and addre Name: Address: Having been named | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 as registered agent to accept service of profamiliar with and accept the appointment as | ocess for the above stated corporation registered agent and agree to act in | this capacity |
| Name: Address: ARTICLE VII II The name and addre Name: Address: Having been named | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 as registered agent to accept service of profamiliar with and accept the appointment as | ocess for the above stated corporation registered agent and agree to act in | |
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| Name: Address: ARTICLE VII II. The name and address: Address: Having been named this certificate, I am J | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 as registered agent to accept service of profamiliar with and accept the appointment as Required Signature/Registered Agent ent and affirm that the facts stated herein | ocess for the above stated corporation registered agent and agree to act in are true. I am aware that the false | this capacity $ \frac{5/9/201}{\text{Date}} $ information submitted in a |
| Name: Address: ARTICLE VII II. The name and address: Address: Having been named this certificate, I am just this docum | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 as registered agent to accept service of profamiliar with and accept the appointment as Required Signature/Registered Agent | ocess for the above stated corporation registered agent and agree to act in are true. I am aware that the false | this capacity $ \frac{5/9/201}{\text{Date}} $ information submitted in a s.S. |
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| Name: Address: ARTICLE VII II. The name and address: Address: Having been named this certificate, I am just this docum | Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 NCORPORATOR ess of the Incorporator is: Jeffrey C. Lemon 116 Pine Circle Drive Lake Mary, FL 32746 as registered agent to accept service of profamiliar with and accept the appointment as Required Signature/Registered Agent ent and affirm that the facts stated herein | ocess for the above stated corporation registered agent and agree to act in are true. I am aware that the false | this capacity $ \frac{5/9/201}{\text{Date}} $ information submitted in a |