

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CORPDIRECT AGENTS, INC.
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Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
LEMONS LEGACY INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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

ARTICLE I NAME Lemons Legacy Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2238 N.W. Embury Terrace
Cape Coral, FL 33983

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
For the transaction of any and all lawful business for which a for-profit corporation may be organized under the Florida Business Corporation Act.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dennis A. Lemons, President	Name and Title: _____
Address: 2238 N.W. Embury Terrace	Address: _____
Cape Coral, FL 33983	_____

Name and Title: Jill W. Lemons, Vice President	Name and Title: _____
Address: 2238 N.W. Embury Terrace	Address: _____
Cape Coral, FL 33983	_____

Name and Title: Teresina M. Lemons, Secretary	Name and Title: _____
Address: 2238 N.W. Embury Terrace	Address: _____
Cape Coral, FL 33983	_____

ARTICLE VI REGISTERED AGENT

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

Name: Mike P. Gunderson, Esq.
Address: 18401 Murdock Circle, Unit C
Port Chadotha, FL 33948-1088

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Jennifer Malatka
Address: 2001 Butterfield Road, Suite 102
Downers Grove, IL 60515

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 further with and accept the appointment as registered agent and agree to act in this capacity

Mike P. Gunderson

Required Signature/Registered Agent

Date

6-20-11

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 817.133, P.S.

Jennifer Malatka

Required Signature/Incorporator

Date

6-23-11

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TALLAHASSEE, FL 32399

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