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(Requestor's Name)

(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers AUG 12 2011

# COVER LETTER

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

**SUBJECT:** Anthony P. Lombardo 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: Anthony Lombardo
Name (Printed or typed)

5 Winslow Place
Address

Palm Coast, FL 32164
City, State & Zip

386-931-5279
Daytime Telephone number

antlom23@aol.com
E-mail address: (to be used for future annual report notification)

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**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: Anthony P. Lombardo Inc

***ARTICLE II PRINCIPAL OFFICE***

Principal **street** address

5 Winslow Place
Palm Coast, FL 32164

Mailing address, if different is:

***ARTICLE III PURPOSE***

The purpose for which the corporation is organized is:

(A.L.) Real Estate Sales, Professional Corporation

***ARTICLE IV SHARES***

The number of shares of stock is: 10

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

Name and Title: Anthony Lombardo
Address: 5 Winslow Place
Palm Coast, FL 32164

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: Anthony Lombardo
Address: 5 Winslow Place
Palm Coast, FL 32164

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TALLAHASSEE, FLORIDA

***ARTICLE VII INCORPORATOR***

The **name and address** of the Incorporator is:

Name: Anthony Lombardo
Address: 5 Winslow Place
Palm Coast, FL 32164

***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 — Date: 6-4-2011

***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 — Date: 6-4-2011