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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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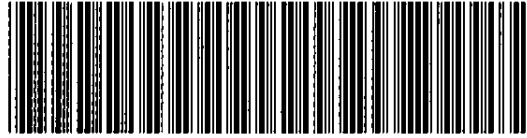
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 AUG 26 AM 11:44

APR 26 2011

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JF

COVER LETTER

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

SUBJECT: LJL & ASSOCIATES, 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: LJL & ASSOCIATES

Name (Printed or typed)

8927 HYPOLUXO ROAD A-4

Address

LAKE WORTH FL 33467

City, State & Zip

561-414-5383

Daytime Telephone number

OTDJEFF@COMCAST.NET

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: LJL & ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8927 HYPOLUXO ROAD A4
LAKE WORTH FL 33467

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
NEW BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JEFF LICHTNER PRESIDENT
Address: 8927 HYPOLUXO ROAD A4
LAKE WORTH FL 33467

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: JEFF LICHTNER
Address: 8927 HYPOLUXO ROAD A4
LAKE WORTH FL 33467

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JEFF LICHTNER
Address: 8927 HYPOLUXO ROAD A4
LAKE WORTH FL 33467

11 AUG 26 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Jeff Lichtner

Required Signature/Registered Agent

8-19-11

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.

Jeff Lichtner

Required Signature/Incorporator

8-19-11

Date