

P120000048818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

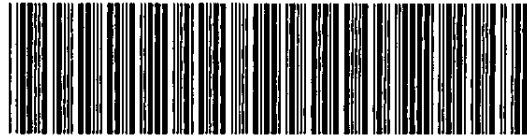
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12 MAY 24 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: _____

Sarah Lundquist, 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: _____

Sarah Lundquist

Name (Printed or typed)

4039 C PALM BAY CIRCLE

Address

WEST PALM BEACH, FL 33406

City, State & Zip

561-628-5244

Daytime Telephone number

SarahLUNDQUIST@ROCKETMAIL.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:

Sarah Lundquist, INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

4039 C PALM BAY CIRCLE
WEST PALM BEACH, FL
33406

12 MAY 24 PM 1:33
Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Educational Services

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SARAH LUNDQUIST

Address: OWNER * DIRECTOR * CEO

4039 C PALM BAY CIRCLE
WEST PALM BEACH, FL 33406

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: SARAH LUNDQUIST

Address: 4039 C PALM BAY CIRCLE
WEST PALM BEACH, FL 33406

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SARAH LUNDQUIST

Address: 4039 C PALM BAY CIRCLE
WEST PALM BEACH, FL 33406

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

[Signature]
Required Signature/Registered Agent

5/21/2012
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.

[Signature]
Required Signature/Incorporator

5/21/2012
Date