

P12000063920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

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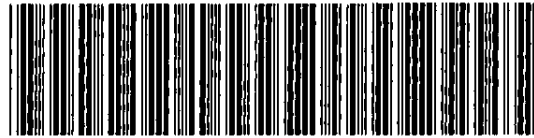
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEPARTMENT OF STATE
12 JUL 23 AM 11:59

MRS
7/23/12

FILED
12 JUL 23 PM 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Genia Ranch Incorporation

(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: LaKeisha D. Williams

Name (Printed or typed)

6727 Ashbury Dr.

Address

Lakeland, FL 33809

City, State & Zip

863-838-7479

Daytime Telephone number

ms.ldw3@gmail.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)

FILED

12 JUL 23 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME Genia Ranch Incorporated
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
6727 Ashbury Dr.
Lakeland, FL 33809

Mailing address, if different is:
P. O. Box 646
Lakeland, FL 33802

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To inject an economic environment by infusing capital and providing resources for both the project and surrounding communities.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LaKeisha D. Williams CEO, President
Address: 6727 Ashbury Dr.
Lakeland, FL 33809

Name and Title: _____
Address: _____

Name and Title: Jessica Jackson- Manager
Address: 6727 Ashbury Dr.
Lakeland, FL 33809

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: LaKeisha D. Williams
Address: 6727 Ashbury Dr.
Lakeland, FL 33809

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LaKeisha D. Williams
Address: 6727 Ashbury Dr.
Lakeland, FL 33809

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

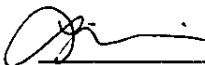

LAKEISHA D. WILLIAMS

Required Signature/Registered Agent

July 18, 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.


LAKEISHA D. WILLIAMS

Required Signature/Incorporator

July 18, 2012

Date