

P12000065877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

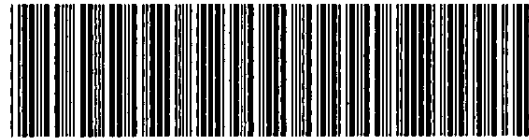
Special Instructions to Filing Officer: SAVE

AUTHORIZATION BY PHONE TO

CORRECT address & add.  
Inspector under signature

DATE  
06/27/AM QS

Office Use Only



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07/27/12--01043--001 \*\*70.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL 27 AM 10:08

PS 7/30/12 491

## COVER LETTER

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

SUBJECT: L-Zimm Ventures, 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: Lynn A Zimmerman

Name (Printed or typed)

2019

1920 S 3rd St

Address

Fort Pierce, FL 34950

City, State & Zip

(772) 985-0632

Daytime Telephone number

lynnie1z@yahoo.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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLE I NAME**

L-Zimm Ventures, Inc

The name of the corporation shall be:

12 JUL 27 AM 10:08

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Lynn A Zimmerman

2019 S 3rd St

Fort Pierce, FL 34950

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

E-commerce. Online products and services.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Lynn A Zimmerman - Director

Address: 2019 S 3rd St

Fort Pierce, FL 34950

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: Lynn A Zimmerman

Address: 2019 S 3rd St

Fort Pierce, FL 34950

**ARTICLE VII INCORPORATOR**

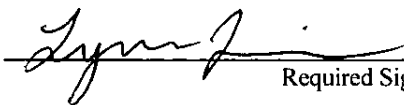
The name and address of the Incorporator is:

Name: Lynn A Zimmerman

Address: 2019 S 3rd St

Fort Pierce, FL 34950

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 / Incorporator

7/03/2012

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.

Required Signature/Incorporator

Date