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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

J. Shivers NOV 20 2012

## COVER LETTER

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

**SUBJECT:** Lindburgers Wellington, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Mark Meyers

\_\_\_\_\_  
Name (Printed or typed)

P.O. Box 3721

\_\_\_\_\_  
Address

Lantana, Florida 33465

\_\_\_\_\_  
City, State & Zip

561-951-0797

\_\_\_\_\_  
Daytime Telephone number

mmeyers@lindburgers.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: Lindburgers Wellington, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

Principal street address  
13860 Wellington Trace 32,33  
Wellington, Florida 33414

Mailing address, if different is:  
P.O. Box 3721  
Lantana, Florida 33465

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Restaurant

## **ARTICLE IV SHARES**

The number of shares of stock is: 3

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

Name and Title: Mark Meyers President  
Address: P.O. Box 3721  
Lantana, Florida 33465

Name and Title: Jeri Meyers Vice President  
Address: P.O. Box 3721  
Lantana, Florida 33465

Name and Title: Kimberly Meyers Secretary  
Address: P.O. Box 3721  
Lantana, Florida 33465

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: Mark Meyers  
Address: 13860 Wellington Trace #32,33  
Wellington, Florida 33414

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Mark Meyers  
Address: 13860 Wellington Trace #32,33  
Wellington, Florida 33414

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

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

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DEPARTMENT OF STATE  
TALLAHASSEE FLORIDA