

P12000103496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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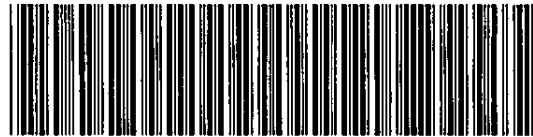
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 DEC 21 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

π 12/26/12

COVER LETTER

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

SUBJECT: Kline Zeigler Used Appliances & Furniture 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: Kline Zeigler
Name (Printed or typed)
1171 N. Tamiami Trail
Address
North Fort Myers, FL 33903
City, State & Zip
239-995-8427
Daytime Telephone number
TBeardmore1@earthlink.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: **Kline Zeigler Used Appliances & Furniture Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1171 N. Tamiami Trail
North Fort Myers, FL 33903

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A new and lawful corporation in the State of Florida

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kline Zeigler President/Treasurer
Address: 1171 N. Tamiami Trail
North Fort Myers, FL 33903

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: Teresa Lea Beardmore, EA
Address: 90 Pine Island Road, Suite B
North Fort Myers, FL 33903

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kline Zeigler
Address: 1171 N. Tamiami Trail
North Fort Myers, FL 33903

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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

Teresa Lea Beardmore EA
Required Signature/Registered Agent

12/18/12
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.

Kline Zeigler
Required Signature/Incorporator

12/18/12
Date