

713000025309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

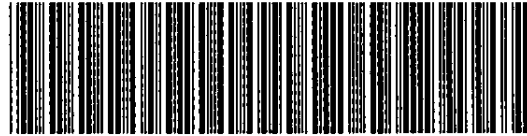
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000245695430

03/18/13--01033--002 \*\*70.00

FILING CANCELLED  
RETURNED CHECK

FILED  
13 MAR 18 AM 10:38  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

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

SUBJECT: LP Reporting, 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: Lisa K. Penkacik

Name (Printed or typed)

2232 Howard Drive

Address

Winter Park, FL 32789

City, State & Zip

407-740-8834

Daytime Telephone number

lpenkacik@cfl.rr.com

E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

FILING CANCELLED  
RETURNED CHECK

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: LP Reporting, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2232 Howard Drive

Winter Park, Fl 32789

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: court reporting

**ARTICLE IV SHARES** 200

The number of shares of stock is:

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

Name and Title: Lisa K. Penkacik - President

Name and Title: \_\_\_\_\_

Address 2232 Howard Drive

Address: \_\_\_\_\_

Winter Park, Fl 32789

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

13 MAR 19 AM 10:38  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

FILING CANCELLED  
RETURNED CHECK

(conti )

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

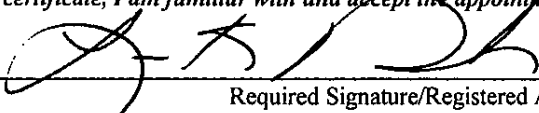
Name: Lisa K. Penkacik  
Address: 2232 Howard Drive  
Winter Park, Fl 32789

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: Lisa K. Penkacik  
Address: 2232 Howard Drive  
Winter Park, Fl 32789

*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

3/9/13  
\_\_\_\_\_  
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

3/9/13  
\_\_\_\_\_  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 MAR 19 AM 10:38

FILED