

P13000043659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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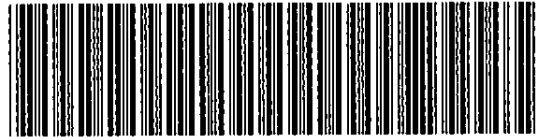
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/01/13--01029--012 **160.00

FILED
13 MAY 13 PM 4: 22
CLERK OF STATE
TALLAHASSEE, FLORIDA

The Orange County Women's Journal
P.O. Box 783271
Winter Garden, FL 34778-3271
864-314-5812
Email: orangecountywomensjournal@yahoo.com

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Attn: Scan Toner

May 6, 2013

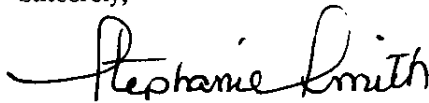
Dear Scan,

I am sending you this letter in reference to our conversation today. The Lake County Women's Journal and the Seminole County Women's Journal were mistakenly registered as fictitious names which do not give me the rights to ownership of them for use in the future.

On March 30th, 2013 I sent you two checks in the amount of \$160.00 each (see attached copies). The fictitious name filing cost \$180.00 which leaves a balance of \$140.00. Please apply the balance to registering the business names as corporations for my use in the future. My paperwork is attached.

Should you have any questions, please feel free to call me at any time. Thank you.

Sincerely,



Stephanie Smith
Publisher
864-314-5812

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: The Lake County Women's Journal, 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: Stephanie Smith

Name (Printed or typed)

P.O. BOX 783271

Address

Winter Garden, FL 34778-3271

City, State & Zip

864-314-5812

Daytime Telephone number

orangecountywomensjournal@yahoo.com ✓

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

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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: The Lake County Women's Journal, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

713 Strihal Loop

Oakland, FL 34787

Mailing address, if different is:

P.O. BOX 783271

Winter Garden, FL 34778-3271

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To educate women and their families

a Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stephanie Smith, President

Address P.O. Box 783271

Winter Garden, FL

34778-3271

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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: Stephanie Smith
Address: 713 Strihal Loop
Oakland, FL 34787

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Stephanie Smith
Address: 713 Strihal Loop
Oakland, FL 34787

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Stephanie Smith
Required Signature/Registered Agent

05-06-13

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.

Stephanie Smith
Required Signature/Incorporator

05-06-13

Date