

P13000065850

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(Business Entity Name)

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13 AUG -5 AM 9:32  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

VH

## COVER LETTER

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

**SUBJECT:** Florida Agricultrual Lab, 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:** Pam Shore

Name (Printed or typed)

1550 Latham road Suite 3

Address

West Palm Beach, FL 33409

City, State & Zip

561-635-1547

Daytime Telephone number

pams@palmbeachlabs.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)

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**ARTICLE I NAME**

The name of the corporation shall be:

Florida Agricultural Lab, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1550 Latham Road

Suite 3

West Palm Beach, FL 33409

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

All legal Purposes

**ARTICLE IV SHARES**

The number of shares of stock is:

2,000

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

Name and Title:

Pam Shore, Pres.

Name and Title:

Address

1550 Latham Road

Address:

Suite 3

West Palm Beach, FL 33409

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

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Name and Title: \_\_\_\_\_ Name and Title: 13 AUG -5 AM 9:32

Address: \_\_\_\_\_ Address: SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

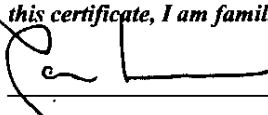
Name: Pam Shore  
Address: 1550 Latham Rd Suite 3  
West Palm Beach, FL 33409

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Pam Shore  
Address: 1550 Latham Rd Suite 3  
West Palm Beach, FL 33409

*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*

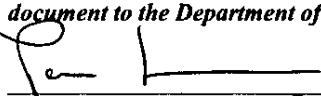


Required Signature/Registered Agent

7.30.13

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

7.30.13

Date