

P130000092653

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1.913-59439

## COVER LETTER

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

SUBJECT: LHV CORP

(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: KEN MAY

Name (Printed or typed)

4798 SOUTH FLORIDA AVE #115

Address

LAKELAND, FL 33813

City, State & Zip

863 608 0831

Daytime Telephone number

kenmay1@yahoo.com

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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 28, 2013

KEN MAY  
4798 SOUTH FLORIDA AVE #115  
LAKELAND, FL 33813

SUBJECT: LHV CORP  
Ref. Number: W13000059839

We have received your document for LHV CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 413A00025082

**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: LHV TRUST CORP

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

101 LK HUNTER DR

LAKELAND FL 33803

Mailing address, if different is:

4798 SOUTH FLORIDA AVE #115

LAKELAND FL 33813

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 200

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

Name and Title: KEN MAY, President & Secretary

Address 4798 S FLORIDA AVE #115

LAKELAND FL 33813

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

(cont.)

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: KEN MAY  
Address: 4798 S FLORIDA AVE #115  
LAKELAND FL 33813

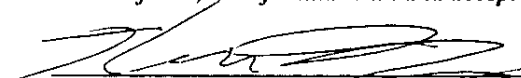
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: KEN MAY  
Address: 4798 S FLORIDA AVE 3115  
\_\_\_\_\_

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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*

  
\_\_\_\_\_  
Required Signature/Registered Agent

11-6-13  
\_\_\_\_\_  
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

11-6-13  
\_\_\_\_\_  
Date