P14-000001236

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
,				
(Document Number)				
(Dodanion) (analy)				
Certified Copies Certificates of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

W13-69290



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12/18/13--01021--011 **78.75



x 01/07/4



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 19, 2013

LEE T. JONES 2090 N. FORSYTH RD. STE. 209 ORLANDO, FL 32807

SUBJECT: LEE, INC.

Ref. Number: W13000069290

RECEIVED

14 JAN -6 PH 2: 50

SEPTEMBERS FLORIG

We have received your document for LEE, INC. 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.

The document number of the name conflict is P00000101000 (LEE CORPORATION).

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 813A00028852

COVER LETTER

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

_{SUBJECT:} Lee	, inc.		
<u></u>	(PROPOSED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation an	d 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	
		e (Printed or typed)	,,-,,
20	090 n forsyth rd s		
or	lando, fl 32807	Address	
	City,	, State & Zip	
40	07-681-9009		
	Daytime 7	elephone number	
in	fo@leetayler.cor	n	
	E-mail address: (to be use	d for future annual report	notification)

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAM The name of the corpora	tion shall be: Le-l	inde	ostri	25,1	NC.
ARTICLE II PRI	Principal street address CONSYTHE 32807	<u> </u>		,	if different is:
-	POSE he corporation is organized is: SS		and	all	lawfu!
ARTICLE V INIT	IRES stock is: 1,000,00 FIAL OFFICERS AND/OR DI :: Leo Tolones F 2090 N.fors Orlando, Fl	IRECTORS Presidenta	me and Title:		14 JAN -6 PH 3: 10 TALLAHASSEE FLENDA
Name and Title: Address					
Name and Title					

Name a	nd Title: 1	Name and Title:
Addres	s	Address:
ARTICLE VI The <u>name and I</u>	REGISTERED AGENT Clorida street address (P.O. Box NOT acceptable) of the	he registered agent is:
Name:	Lee J Jones	است. نام خورا
Address:	2090 N. forsyth T Orlando, FI 32	Rd E S
	Orlando, Fl 32	807
<u>ARTICLE VII</u>	INCORPORATOR	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	Lee T Jones	>
Address:	2010 N. forsyth oriando, Fl 3280	15g.
	orlando, Fl 3280	57
	med as registered agent to accept service of process for am familiar with and accept the appointment as regist	for the above stated corporation at the place designated in stered agent and agree to act in this capacity
	In by	Jan 01, 2014
	Required Signature/Registered Agent	Date
		rue. I am aware that the false information submitted in a
	Required Signature/Incorporator	Jan 01, 2014