

P14000004603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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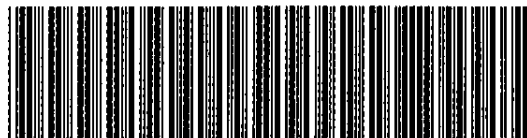
(Business Entity Name)

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DIVISION OF CORPORATIONS
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124

COVER LETTER

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

SUBJECT: THE VILLAGES FAMILY ENTERPRISE, 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: JOEL A LUSSIER
Name (Printed or typed)
4245 SE 104TH STREET
Address
BELLEVUE, FL 34420
City, State & Zip
352 - 217 - 5567
Daytime Telephone number
NEDT2@Aim.com
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)

ARTICLE I NAME

The name of the corporation shall be: THE VILLAGES FAMILY ENTERPRISE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4265 SE 106th STREET
BELLEVIEW FL 34420

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUY AND SELL GOLF CARTS
REPAIR AND REFURRISH GOLF
CARTS

ARTICLE III (A) EFFECTIVE DATE

EFFECTIVE DATE OF THE INCORPORATION
IS JANUARY 1, 2014

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOEL LUSSIER PRESIDENT

Address: 4265 SE 106th STREET

BELLEVIEW FL 34420

Name and Title: Cassandra Lussier, Director

Address: 4265 SE 106th St.

Belleview, FL 34420

Name and Title: Alexandra Lussier, Director

Address: 4265 SE 106th St.

Belleview, FL 34420

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(cont)

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DIVISION OF CORPORATION

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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ARTICLE VI REGISTERED AGENT

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

Name: JOEL LUSSIER
Address: 4245 SE 186TH STREET
BELLEVIEW FL 34420

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOEL LUSSIER
Address: 4245 SE 186TH STREET
BELLEVIEW FL 34420

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

Joel A. Lussier _____ Date 1/6/14
Required Signature/Registered Agent

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.817.133, F.S.

Joel A. Lussier _____ Date 1/6/14
Required Signature/Incorporator