# P14000011257

	· · · · · · · · · · · · · · · · · · ·	
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doe	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
:		
		į



100255868831

01/31/14--01013--011 \*\*87.50

14 JAN 31 PM 1: 20

# **COVER LETTER**



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

Lone Eagle Aviation Florida 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

Filing Fee

& Certified Copy

\$87.50

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

Charles L.Rayr	mond
	Name (Printed or typed)
2654 State Parl	k Road
	Address
Lakeland, Florid	da, 33805
	City, State & Zip
863-581-9564	863-327-7511
Dayt	time Telephone number
	time Telephone number

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

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

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

	NCIPAL OFFICE Principal street address		Mailing address, if different is:
54 State Pa	· · · · · · · · · · · · · · · · · · ·	Same	_
keland, Flo			
805			
000	<del></del>		
PURION PU	POSE he corporation is organized is: Any and	all lawful bu	siness in the state of Flo
		·····	
_ · _ · .			
	,		3
TICLE IV SHA	<i>RES</i> 5000		
TCLE IV SHA			
ICLE V INT	TAL OFFICERS AND/OR DIRECTOR		Barbara A Raymond / Vice Presid
TCLE V INT	TAL OFFICERS AND/OR DIRECTOR Charles L. Raymond / President	Name and Title	Barbara A. Raymond / Vice Presid
ICLE V INT	Charles L. Raymond / President 2654 State Park Road		Barbara A. Raymond / Vice Preside
TCLE V INT	TAL OFFICERS AND/OR DIRECTOR Charles L. Raymond / President	Name and Title	Barbara A. Raymond / Vice Presid
Name and Title Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address:	Barbara A. Raymond / Vice Presidents 2654 State Park Rose Lakeland, Florida 33805
Name and Title Address Name and Title:	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address: Name and Title	Barbara A. Raymond / Vice Preside 2654 State Park Rose Lakeland, Florida 33805
Name and Title Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address:  Name and Title Address:	Barbara A. Raymond / Vice Preside 2654 State Park Roa Lakeland, Florida 33805
Name and Title Address Name and Title:	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address: Name and Title Address:	Barbara A. Raymond / Vice President 2654 State Park Roal Lakeland, Florida 33805
Name and Title Address  Name and Title: Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address:  Name and Title Address:	Barbara A. Raymond / Vice President 2654 State Park Rose Lakeland, Florida 33805
Name and Title Address  Name and Title: Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address:  Name and Title Address:	Barbara A. Raymond / Vice President 2654 State Park Rose Lakeland, Florida 33805

Name	and Title:	Name and Title:	<del></del>	
Addr	ess	Address:	_	
			_	
		<del></del>	<del></del>	
ARTICLE VI				
i ne <u>name and</u>	Florida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name:	William A. Moffat		14.	ć
Address:	115 Van Fleet Drive	_	JAN 31 PM	í
	Bartow, Florida, 33830	_	31	,
ARTICLE VI	II INCORPORATOR		14 JAN 31 PM 1:21	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
The name and	address of the Incorporator is:			Š
Name:	Charles L. Raymond			
Address:	2654 State Park Road	_		
	Lakeland, Florida, 33805	_		
this certificate,	I am familiar with and accept the appointment as reg	true. I am aware that the false information submitted in y as provided for in s.817.155, F.S.	D14- n a	
Charle	Required Signature/Incorporator		ZUIY	

# **COVER LETTER**

rtment of State Filing Section ....sion of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Lone Eagle Aviation Florida Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	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 CO	)PY REQUIRED

<sub>OM:</sub> Charles L.Raymor	nd
Name	(Printed or typed)
2654 State Park R	oad
A	Address
Lakeland, Florida,	
City,	State & Zip
863-581-9564	863-327-7511
Daytime T	elephone number
loneeagleaviation@ho	otmail.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)

ADTIFIE II DDI			lnc.
	NCIPAL OFFICE Principal street address		Mailing address, if different is:
2654 State Park Road		Same	
Lakeland, Flo	rida		
33805			***************************************
ARTICLE III PUR. The purpose for which t	POSE he corporation is organized is: Any and	all lawful bu	siness in the state of Florida
			14 JAN 3
		' rr sa r r r r r r r r r r r r r r r r r	<del>-</del>
			2
Name and Title	TAL OFFICERS AND/OR DIRECTOR Charles L. Raymond / President	_	Barbara A. Raymond / Vice President
	Charles L. Raymond / President 2654 State Park Road	Name and Title:	Barbara A. Raymond / Vice President  2654 State Park Road
Name and Title	Charles L. Raymond / President	_	
	Charles L. Raymond / President 2654 State Park Road	Name and Title:	2654 State Park Road
Address  Name and Title:	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida	Name and Title: Address:	2654 State Park Road Lakeland, Florida 33805
Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title: Address: Name and Title:	2654 State Park Road Lakeland, Florida 33805
Address  Name and Title:	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title: Address: Name and Title:	2654 State Park Road Lakeland, Florida 33805
Address  Name and Title:  ** Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title: Address: Name and Title: Address:	2654 State Park Road Lakeland, Florida 33805
Address  Name and Title:  ** Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title: Address: Name and Title: Address: Name and Title:	2654 State Park Road Lakeland, Florida 33805

Name and	Title:	Name and Title:
Address		Address:
	REGISTERED AGENT  Orida street address (P.O. Box NOT acceptable) of  William A. Moffat	the registered agent is:
Name:	115 Van Fleet Drive	
Address:	Bartow, Florida, 33830	SEC SEC
ARTICLE VII	INCORPORATOR	JAN 31 PH
The <u>name and ad</u>	dress of the Incorporator is:	ORAN
Name:	Charles L. Raymond	T: 2
Address:	2654 State Park Road	<b>-</b> <del>3</del>
,	Lakeland, Florida, 33805	
I submit this document to the	am familiar with and accept the appointment as reg	true. I am aware that the false information submitted in a

# **COVER LETTER**

v Filing Section ision of Corporations Pr.O. Box 6327 Tallahassee, FL 32314

SUBJECT: Lone Eagle Aviation Florida Inc.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
□ \$70.00 Filing Fee	inal and one (1) copy of the article \$78.75 Filing Fee & Certificate of Status	s78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: Charles L.Raymond Name (Printed or typed)  2654 State Park Road				
Lakeland, Florida, 33805  City, State & Zip				

863-581-9564

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

Daytime Telephone number

Ioneeagleaviation@hotmail.com
E-mail address: (to be used for future annual report notification)

863-327-7511

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

TICLE II PRI	NCIPAL OFFICE Principal street address		Mailing address, if different is:	
654 State Park Road akeland, Florida		Same		
		<del>- 4 , 1 1, 1, 2</del>		
805				
purpose for which t	POSE he corporation is organized is:  Any and	all lawful bu	usiness in the state of l	Flori
				7
•				N
				ယ
		,	, , , , , , , , , , , , , , , , , , , ,	<u>မ</u>
TICLE IV SHA	ures stock is:		, , , , , , , , , , , , , , , , , , , ,	31 PA
				31 PM
FICLE V INIT	TIAL OFFICERS AND/OR DIRECTOR	_	Barbara A. Raymond / Vice Pr	31 PM 1:21
<b>FICLE V INT</b> Name and Title		Name and Title	Barbara A. Raymond / Vice Pr 2654 State Park F	31 PM 1: 21
FICLE V INIT	TIAL OFFICERS AND/OR DIRECTOR Charles L. Raymond / President	_	•	31 PM 1: 21
<b>FICLE V INT</b> Name and Title	Charles L. Raymond / President 2654 State Park Road	Name and Title	2654 State Park F	31 PM 1: 21
Name and Title Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida	Name and Title Address:	2654 State Park F Lakeland, Florida 33805	31 PH 1: 21
Name and Title Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address:  Name and Title Address:	2654 State Park F Lakeland, Florida 33805	31 PN 1: 21
Name and Title Address Name and Title:	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address:  Name and Title Address:	2654 State Park F Lakeland, Florida 33805	31 PH 1: 21
Name and Title Address  Name and Title: Address	Charles L. Raymond / President 2654 State Park Road Lakeland , Florida 33805	Name and Title Address:  Name and Title Address:	2654 State Park F Lakeland, Florida 33805	31 PM 1: 21

Name and	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	William A. Moffat	
Address:	115 Van Fleet Drive	74 DIV
	Bartow, Florida, 33830	SECRETARY VISION OF C
ARTICLE VII The name and ac	idress of the Incorporator is:  Charles L. Raymond 2654 State Park Road	FILED STATE OF CORPORATIONS  31 PH 1:21
Addr <del>e</del> ss:	Lakeland, Florida, 33805	
this certificate, I	am familiar with and accept the appointment as reg	true. I am aware that the false information submitted in a