

P14000029025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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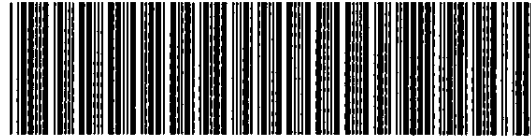
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATE AFFAIRS  
2014 MAR 31 PM 3:45

1/H

## COVER LETTER

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

SUBJECT: Larry D. Strunk, P.A.

(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: Larry D Strunk

Name (Printed or typed)

1502 SE 16th St

Address

Cape Coral, FL 33990

City, State & Zip

(239) 240-6851

Daytime Telephone number

ldstrunk@gmail.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: Larry D. Strunk, P.A.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1502 SE 16th St

N/A

Cape Coral, FL 33990

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Real Estate

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Larry D Strunk , President

Name and Title: N/A

Address 1502 SE 16th St.

Address:

Cape Coral, FL

33990

Name and Title: N/A

Name and Title: N/A

Address

Address:

Name and Title: N/A

Name and Title: N/A

Address

Address:

(cont.)

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DIVISION OF CORPORATE  
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Name and Title: N/A

Name and Title: N/A

Address: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Larry D Strunk

Address: 1502 SE 16th St.

Cape Coral, FL 33990

**ARTICLE VII INCORPORATOR**

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

Name: Larry D Strunk

Address: 1502 SE 16th St

Cape Coral, FL 339910

*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

03/27/2014

\_\_\_\_\_  
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

03/27/2014

\_\_\_\_\_  
Date