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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : CORP USA
Account Number : 072450003255
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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RECEIVED
14 NOV -7 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
LEAD ME MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	$78.75

84009

Electronic Filing Menu Corporate Filing Menu Help

H14000260208

(4)

COVER LETTER

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

SUBJECT: LEAD ME MANAGEMENT, 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: AMERITAX FINANCIAL SERVICES INC.
Name (Printed or typed)

8871 WILES ROAD # 308
Address

CORAL SPRINGS, FL. 33067
City, State & Zip

954-319-1481
Daytime Telephone number

AMERITAX@MCOM.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: LEAD ME MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address

1166 WEST NEWPORT CENTER DRIVE
SUITE #112
DEERFIELD BEACH, FL. 33442

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: THIS CORPORATION IS ORGANIZED FOR THE PURPOSE OF TRANSACTING ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES
The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ROBERT CLAUSE, PRES.
Address: 1166 W. NEWPORT CENTER DRIVE #112 DEERFIELD BEACH, FL 33442

Name and Title: MICHELLE CLAUSE, V.P.
Address: 1166 W. NEWPORT CENTER DRIVE #112 DEERFIELD BEACH, FL. 33442

Name and Title:
Address

Name and Title:
Address:

Name and Title:
Address

Name and Title:
Address:

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(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: AMERITAX FINANCIAL SERVICES, Inc.

Address: 9871 WILES ROAD #308
CORAL SPRINGS, FL. 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: IRWIN MILLSTEIN

Address: 9871 WILES ROAD #308
CORAL SPRINGS, FL. 33067

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.

PRES. IRWIN MILLSTEIN
Required Signature/Registered Agent

11/6/14
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

11/6/14
Date

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11/07/2014 11:43 3056339696 CORP USA PAGE 04/04