

P/4000093437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800266513258

11/17/14--01009--021 **70.00

FILED
14 NOV 17 PM 2:17
FILING OFFICE
MILWAUKEE, WI

11/18/14

COVER LETTER

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

SUBJECT: **JANA LYNN LUTZ, PA**

(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 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **Jana Lutz**

Name (Printed or typed)

4545 Brittany Heyworth Way Apt 204

Address

Lakeland, FL 33813

City, State & Zip

863-602-8992

Daytime Telephone number

JLStewart00@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: JANA LYNN LUTZ, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4545 Brittany Heyworth Way

Apt 204

Lakeland, FL 33813

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JANA L. LUTZ, Pres

Name and Title: _____

Address 4545 Brittany Heyworth Way

Address: _____

Apt. 204

Lakeland, FL 33813

Name and Title: Thomas C Lutz, Dir

Name and Title: _____

Address 4545 Brittany Heyworth Way

Address: _____

Apt 204

Lakeland, FL 33813

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Jana Lutz

Address: 4545 Brittany Heyworth Apt 204

Lakeland, FL 33813

ARTICLE VII INCORPORATOR

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

Name: Jana L. Lutz

Address: 4545 Brittany Heyworth Apt 204

Lakeland, FL 33813

FILED
14 NOV 17 PM 2:17
TALLAHASSEE, FL

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

Jana Lutz

Required Signature/Registered Agent

11-11-14

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.

Jana Lutz

Required Signature/Incorporator

11-11-14

Date