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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

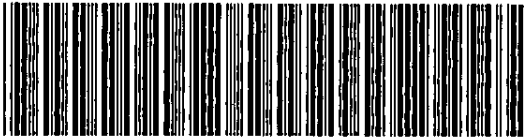
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014/12/15 11:23 AM  
Filing Office

## COVER LETTER

ATX1

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

**SUBJECT:** Len Kaiser & Associates, 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:** Leonard P. Kaiser

Name (Printed or typed)

2749 Ravella Way

Address

Palm Beach Gardens, FL 33410-2966

City, State & Zip

(561) 827-2781

Daytime Telephone number

lpkaiser347@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: Len Kaiser & Associates, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address

Mailing address, if different is:

2749 Ravella Way

Palm Beach Gardens, FL 33410-2966

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To offer financial, managerial & operational consulting to  
small & medium size companies.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Leonard P. Kaiser - President

Name and Title: \_\_\_\_\_

Address: 2749 Ravella Way

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

Palm Beach Gardens, FL 33410-2966

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

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

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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: Leonard P. Kaiser

Address: 2749 Ravella Way

Palm Beach Gardens, FL 33410-2966

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Leonard P. Kaiser

Address: 2749 Ravella Way

Palm Beach Gardens, FL 33410-2966

*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*

<u>Leonard P. Kaiser</u>	<u>12/10/2014</u>
Required Signature/Registered Agent	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.*

<u>Leonard P. Kaiser</u>	<u>12/10/2014</u>
Required Signature/Incorporator	Date

14 DEC 15 PM 12:23