

P15000014393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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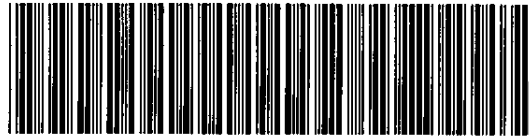
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*COJ

2/12/15

COVER LETTER

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

SUBJECT: Lady Vintage Incorporated

(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: Katherine Vaughn

Name (Printed or typed)

961 N Heron Cir

Address

Winter Haven, FL 33884

City, State & Zip

863-287-0969

Daytime Telephone number

ladyvintageflorida@yahoo.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: Lady Vintage Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

961 N Heron Cir

Winter Haven, FL 33884

Mailing address, if different is:

961 N Heron Cir

Winter Haven, FL 33884

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct lawful business as a retail store.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Katherine Vaughn, Owner

Address: 961 N Heron Circle
Winter Haven, FL 33884

Name and Title: Rachel Erwine, Owner

Address: 4981 Mandolin Court
Winter Haven, FL 33884

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FL 32310

(conti.)

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: Katherine Vaughn
Address: 961 N Heron Circle
Winter Haven, FL 33884

ARTICLE VII INCORPORATOR

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

Name: Rachel Erwine
Address: 4981 Mandolin Court
Winter Haven, FL 33884

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

Katherine Vaughn 1/24/2015
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.

Rachel Erwine 1/24/2015
Required Signature/Incorporator Date