039 . (Requestor's Name) (Address) 400272177164 (Address) (City/State/Zip/Phone #) 04/28/15--01033--001 **70.00 PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status Special Instructions to Filing Officer: ភ APR 28 ΓΓ ILED PN 4: 27 Office Use Only

5|4/15

COVER LETTER

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

SUBJECT: Lorraine Bryner 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 Filing Fee □ \$78.75 Filing Fee & Certificate of Status

\$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL COPY REQUIRED	

 $\hat{\alpha}$

FROM: Lorraine Bryner			
Name (Printed or typed)	_		
5356 Cobalt Court			
Address	_		
Cape Coral FL 33904	-,		
City, State & Zip		ភ	
239-443-9073		APR	
Daytime Telephone number		28	_
lorrainebryner@gmail.com		Pir l	
E-mail address: (to be used for future annual report notification)		ŧ:	
	ini	27	

NOTE: Please provide the original and one copy of the articles.

April 22, 2015

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Department of State Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Reference Lorraine Bryner, PA

Document Number P13000037507

Dear Department:

It has come to my attention that the annual report for my company was not filed timely.

As the president of this corporation I would like for the department to release my document number P13000037507 at this time.

I am further enclosing articles that I would like the state to process at this time.

Thanking you for you help in taking care of these matters timely.

Sincerely,

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Lorraine Bryner

President

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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: Lorraine Bryner PA ARTICLE II PRINCIPAL OFFICE Principal street address Principal street address 5356 Cobalt Court Cape Coral, FL 33904	15 APK 28 PH 1: 2
5356 Cobalt Court	
	Mailing address; if different is:
Cape Coral, FL 33904	Mailing address, if different is: OF STATE
he purpose for which the corporation is organized is: Any and	all lawful business relating to
icensed real estate agent sales	
RTICLE IV SHARES 500 shares @ \$1.00 par value per sh	200
he number of shares of stock is:	
RTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: Lorraine Bryner, President	
5356 Cobalt Court	Address:
Cape Coral, FL 33904	
Name and Title: !	Name and Title:
Name and Title: Image: Address	
Address	Address:
Address /	Address:
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:	Lorraine Bryner 5356 Cobalt Court	
Address:		
	Cape Coral, FL 33904	

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:	Lorraine Bryner	
Address:	5356 Cobalt Court	
	Cape Coral, FL 33904	

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 4/22/15 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.

Konne 54-Required Signature/Incorporator M-ne/

4/22/15 Date

(conti.)

