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(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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COVER LETTER

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

SUBJECT:/	C Harrington (PROPOSED CORPORA	Inc	
	(PROPOSÉD CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Filing Fee,
		ADDITIONAL CO	
FROM:	Richard + Lora Nam		<u> </u>
	761 Lenor	Address	
	The Villages, 1	EL 32/42 , State & Zip	
	616 402 6. Daytime 7	162	
		~	
	harring toncar	tage Wgma	il. com
	E-man address; do be use	eo tor tuture annual renort:	กดบบดสบดทา

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)

LE II PRI	NCIPAL OFFICE		
	Principal street address		Mailing address, if different is:
761 Le	nore lane		
The VIII.	iges, FL 32162		
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CLE III PUR	POSE he corporation is organized in:	ansport	him of height
pose for which t	ne corporation is organized is	avioporsati	2010 01 12 9100
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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	
Name: Lora	Harrington
Name: Address: The Villages, Fi	are
The Villages, FI	<u>L 321</u> 62
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Lora Harrin	glow
Address: 76/ Lenote of	Lane
Name: Lora Harrin 76/ Lenore of The Villages,	FL 32162
this certificate, I am familiar with and accept the appoint	vice of process for the above stated corporation at the place designated in intment as registered agent and agree to act in this capacity
Required Signature/Register	6/5/2015
Required Signature/Register	ed Agent Date
I submit this document and affirm that the facts state document to the Department of State constitutes a third	ed herein are true. I am aware that the false information submitted th a
Tan Harry Ro	6/5/2015
Required Signature/Incorp	porator Date