

P15000073621

(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:

W15-168

Office Use Only



000267712870

12/30/14--01026--003 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 SEP -4 PM 2:42

APPROVED
AND
FILED

16



CONNER • BOSCH LAW, P.A.
ATTORNEYS

4488 North Oceanshore Boulevard
Palm Coast, Florida 32137
Telephone (386) 445-9322
Facsimile (386) 446-4951

Timothy J. Conner
tjconner@cblpa.com

William J. Bosch
wbosch@cblpa.com

January 19, 2015

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Articles of Organization Filing for
Lorraine Caucci Interior Design, P.A.
Your Letter Number: 515A00000019

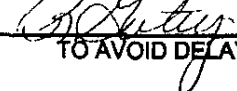
Dear Sir/Madam:

Please find enclosed an original and one copy of corrected Articles of Organization for Lorraine Caucci Interior Design, P.A. along with a copy of your letter dated January 2, 2015. You are already in receipt of the \$70.00 for the appropriate fees to file. As previously requested, please stamp the duplicate when processed and return in the self-addressed, stamped envelope previously provided.

Thank you for your attention to this matter.

Sincerely,

SIGNED IN ATTORNEYS' ABSENCE

BY 
TO AVOID DELAY

Timothy J. Conner
Attorney
TJC:rg
Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 2, 2015

TIMOTHY J. CONNER
CONNER, BOSCH LAW, P.A.
4488 NORTH OCEANSHORE BOULEVARD
PALM COAST, FL 32137

SUBJECT: LORRAINE CAUCCI INTERIOR DESIGN, P.A.
Ref. Number: W15000000108

We have received your document for LORRAINE CAUCCI INTERIOR DESIGN, P.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document.

Please remove "any activities or business permitted" and list only the licensed purpose.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 515A00000019

APPROVED
AND
FILED

15 SEP -4 PM 2:43

ARTICLES OF INCORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as Incorporator of a corporation under the Florida General Corporation Act, adopts the following Articles of Incorporation for such corporation:

1. **NAME AND ADDRESS OF CORPORATION**: The name of this corporation is: **LORRAINE CAUCCI INTERIOR DESIGN, INC.** The physical and mailing address of the corporation is 509 Granada Drive, Palm Coast, Florida 32137.

2. **DURATION**: The period of its duration is perpetual.

3. **PURPOSE**: The purpose is to engage in any activities or business permitted under the laws of the United States and Florida.

4. **CAPITAL STOCK**: The corporation is authorized to issue 100 shares of stock, all of one class, at One Dollar (\$1.00) par value.

5. **INITIAL REGISTERED OFFICE AND AGENT**: The name and address of the initial registered agent and office of this corporation is as follows:

**LORRAINE CAUCCI
509 Granada Drive
Palm Coast, Florida 32137**

6. **INITIAL BOARD OF DIRECTORS**: This corporation shall have one (1) director initially. The number of directors may be either increased or decreased from time to time by an amendment of the by-laws of the corporation in the manner provided by law, but shall never be less than one (1) director.

The name and address of the initial director of this corporation is:

**LORRAINE CAUCCI
509 Granada Drive
Palm Coast, Florida 32137**

7. **INCORPORATOR**: The name and address of the Incorporator signing these Articles of Incorporation is:

LORRAINE CAUCCI
509 Granada Drive
Palm Coast, Florida 32137

8. **AMENDMENT OF ARTICLES**: This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

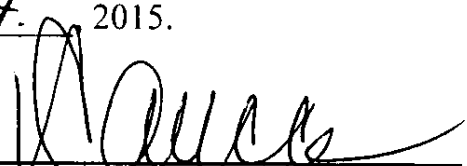
9. **MEETINGS BY CONFERENCE TELEPHONE**: Members of the Board of Directors may participate in all regular and special meetings of the Board of Directors by means of Conference Telephone or similar communications equipment as provided by law.

10. **INDEMNIFICATION**: The corporation may be empowered to indemnify any officer or director, or any former officer or director in the manner provided for in the by-laws of this corporation.

11. **REMOVAL OF DIRECTORS**: At a meeting of shareholders called expressly for that purpose, any one director, or the entire Board of Director(s), may be removed, with or without cause, by a vote of the holders of 75% of the shares then entitled to vote at an election of directors.

12. **INFORMAL ACTION OF DIRECTORS**: If all the directors severally, or collectively consent in writing to any action taken or to be taken by the corporation, and the writings evidencing their consent are filed with the secretary of the corporation, the action shall be as valid as though it had been authorized at a meeting of the Board of Directors.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 1st day of Sept. 2015.

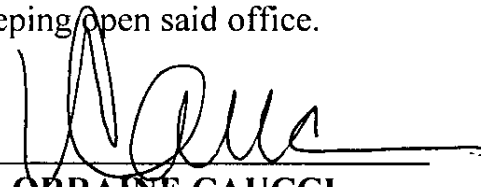

LORRAINE CAUCCI, Incorporator

APPROVED
AND
FILED

16 SEP -4 PM 2:43

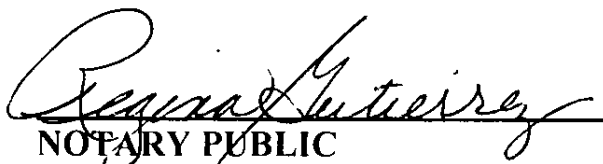
ACCEPTANCE BY REGISTERED AGENT

Having been designated as registered agent to accept service of process for the above-stated corporation, at the registered office above, I hereby accept said designation, agree to act in this capacity, and agree to comply with the provisions of Section 48.091, Florida Statutes relative to keeping open said office.


LORRAINE CAUCCI
Registered Agent

**STATE OF FLORIDA
COUNTY OF FLAGLER**

The foregoing instrument was acknowledged before me this 1st day of Sept., 2015, by **LORRAINE CAUCCI** who is personally known to me or who has produced _____ as identification and who did/did not take an oath.


NOTARY PUBLIC
My Commission Expires:

