

P16000016252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

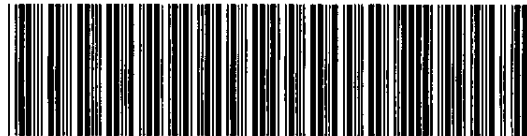
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/11/16--01020--002 **70.00

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16 FEB 11 PM 4:54
TALLAHASSEE, FL 32301
CLERK OF SUPERIOR COURT

FEB 22 2016
D CUSHING

COVER LETTER

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

SUBJECT: Lee Herald, 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: DOMINICK DESARNO

Name (Printed or typed)

9128 STRADA PL, #10115

Address

NAPLES, FL 34108

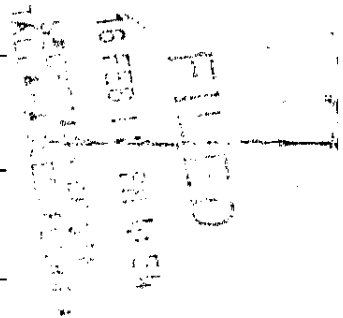
City, State & Zip

239-785-4583

Daytime Telephone number

BILLING@NAPLESHERALD.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: LEE HERALD, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9128 STRADA PL, #10115

NAPLES, FL 34108

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL LAWFUL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dan Jones, Vice-President (AMBR)

Address: 9128 STRADA PL, #10115
NAPLES, FL 34108

Name and Title: Sasha Bogojevic, President (MGR)

Address: 9128 STRADA PL, #10115
NAPLES, FL 34108

Name and Title: Dominick DeSarno, Treasurer (AMBR)

Address: 9128 STRADA PL, #10115
NAPLES, FL 34108

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

FILED
NOV 11 2014
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF S.W. FLA.

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: DOMINICK DESARNO
Address: 9128 STRADA PL, #10115
NAPLES, FL 34108

ARTICLE VII INCORPORATOR

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

Name: DOMINICK DESARNO
Address: 9128 STRADA PL, #10115
NAPLES, FL 34108

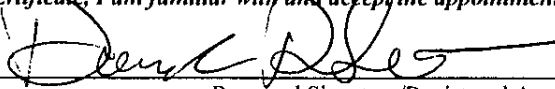
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: FEBRUARY 8, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

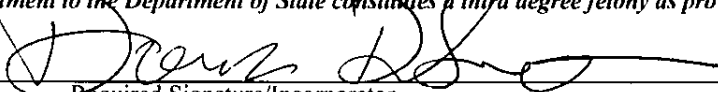


Required Signature/Registered Agent

02/07/2016

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.



Required Signature/Incorporator

02/07/2016

Date

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CLERK OF COURT
STATE OF FLORIDA
NAPLES COUNTY