

P 16000068462

(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:

Office Use Only

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400288716284

08/17/10--01010--008 **78.75

RECEIVED
16 AUG 17 AM 11:59
FILED
16 AUG 17 PM 0:21

8/19/10

COVER LETTER

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

SUBJECT: Livingston Sales Corp.

(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: Incorporating Services, Ltd.

Name (Printed or typed)

Address

Tallahassee, FL 32301

City, State & Zip

Daytime Telephone number

John@Bulgerlaw.com

E-mail address: (to be used for future annual report notification)

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

FILED
16 AUG 17 AM 8:21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

FILED

16 AUG 17 AM 8:21

August 17, 2016

INCORPORATING SERVICES, LTD.

SUBJECT: LIVINGSTON SALES CORP.
Ref. Number: W16000057274

We have received your document for LIVINGSTON SALES CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 916A00017456

TO ADVISE
SUFFICIENCY OF FILING

16 AUG 18 PM 3:54

RECEIVED
DIVISION OF STATE
CORPORATIONS

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

FILED

16 AUG 17 11 3 21

ARTICLE I NAME

The name of the corporation shall be: Livingston Sales Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

28102 Castellano Way

Naples, Florida 34110

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for which corporations may be organized under Florida Statutes.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Thomas W. Hassett, Director, President</u>	Name and Title:	<u>Thomas W. Hassett, Secretary</u>
Address	<u>28102 Castellano Way</u>	Address:	<u>28102 Castellano Way</u>
	<u>Naples, Florida 34110</u>		<u>Naples, Florida 34110</u>
<hr/>			
Name and Title:	<u>Thomas W. Hassett, Treasurer</u>	Name and Title:	<u></u>
Address	<u>28102 Castellao Way</u>	Address:	<u></u>
	<u>Naples, Florida 34110</u>		<u></u>
<hr/>			
Name and Title:	<u></u>	Name and Title:	<u></u>
Address	<u></u>	Address:	<u></u>
	<u></u>		<u></u>
<hr/>			

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: Incorporating Services, Ltd.
Address: 1540 Glenway Drive
Tallahassee, Florida 32301

ARTICLE VII INCORPORATOR

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

Name: John L. Bulger
Address: 693 East Avenue, Suite 105
Rochester, New York 14623

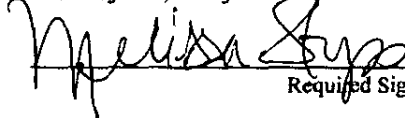
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (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

8/16/16
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

August 16, 2016

Date

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16 AUG 17 AM 8:22