

P17000064708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

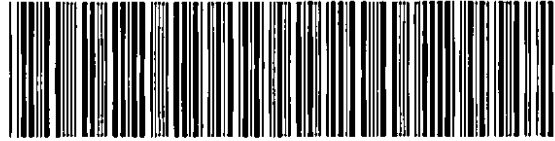
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

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

SUBJECT: Lee & Madison, 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: Daniel B. Knight, Jr.
Name (Printed or typed)

P.O. Box 120
Address

Madison FL 32341
City, State & Zip

561-420-3779
Daytime Telephone number

dnlb516@yahoo.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 & Madison, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1311 NW Littlecat Rd
Madison, FL 32340

Mailing address, if different is:
P.O. Box 120
Madison, FL 32341

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Deniel Boknight, Jr CEO/President Name and Title: _____

Address: P.O. Box 120 Address: _____
Madison, FL 32341

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

STATE OF FLORIDA
DIVISION OF CORPORATIONS
17 AUG - 2 PM 12: 51

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: Daniel B. Knight Jr.
 Address: 1311 NW Littleton Road
Madison, FL 32340

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Daniel B. Knight, Jr.
 Address: 1311 NW Littleton Road
Madison, FL 32340

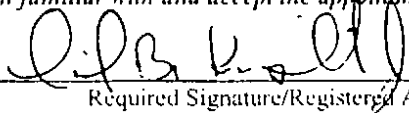
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 28, July ~~2 Aug~~ 2017 (OPTIONAL)

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

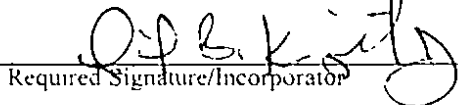
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

2 Aug 2017
 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

2 Aug 2017
 Date

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
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