

P170000 67965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

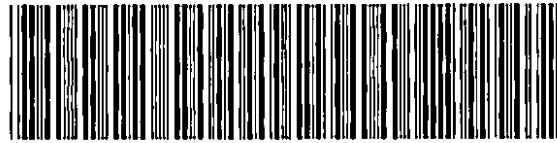
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600302290866

08/14/17--01009--004 **78.75

RECEIVED
17 AUG 14 AM 10:29

N. SAMS
AUG 14 2017

FILED
2017 AUG 14 AM 10:38
CLERK OF COURT
CLERK OF COURT

COVER LETTER

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

SUBJECT: LED Enterprises ~~LLC~~ - 1 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: LED Enterprises ~~LLC~~ - 1 inc
Name (Printed or typed)

16100 ~~Baymeadows~~ Baymeadows Rd # 1408
Address

Jacksonville FL 32256
City, State & Zip

850 321 5717
Daytime Telephone number

mslucydavis@gmail.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)

FILED

2017 AUG 14 AM 10:38

ARTICLE I NAME

The name of the corporation shall be: LED Enterprises-1 Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address: 10100 Baymeadows Rd #1408

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lucy Davis

Name and Title: President

Address: 10100 Baymeadows Rd #1408
Jacksonville FL
32256

Address:

Name and Title:

Address:

Name and Title:

Address:

FILED

Name and Title: _____ Name and Title: _____ 2017 AUG 14 AM 10:38

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: _____

Address: _____

Lucy Davis
16100 Baymeadows Rd #1408
Jacksonville FL 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____

Address: _____

Lucy Davis
10100 Baymeadows Rd #1408
Jacksonville FL 32256

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 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

8/14/17

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

8/14/17

Date