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(Requestor's Name)

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(Business Entity Name)

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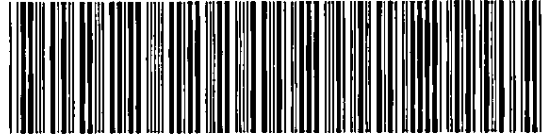
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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive

Tallahassee, Florida 32312

(850) 656-4724

DATE 9-7-17  
\*\*WALK IN\*\*

ENTITY NAME Lemon Bay Storage Corp

DOCUMENT NUMBER (Dee UCS)

\*\*PLEASE FILE THE ATTACHED AND RETURN\*\*

☒

Plain Copy

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Certified Copy

☐

Certificate of Status

☐

\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\*

☐

Certified Copy of Arts & Amendments

☐

Certificate of Good Standing

☐

\*\*APOSTILLE' / NOTARIAL CERTIFICATION\*\*

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL \$ OWED 70.00  
CHECK # 4028

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Please call Tina at the above number for any issues or concerns. Thank you so much!

## COVER LETTER

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

**SUBJECT:** LEMON BAY STORAGE 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:** Richard J. Day, Esq., Barclay Damon, LLP  
\_\_\_\_\_  
Name (Printed or typed)  
  
200 Delaware Avenue, Suite 1200  
\_\_\_\_\_  
Address  
  
Buffalo, NY 14202  
\_\_\_\_\_  
City, State & Zip  
  
716-566-1422  
\_\_\_\_\_  
Daytime Telephone number  
  
stevegrzenda@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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**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: LEMON BAY STORAGE CORP.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

109 Seymour Drive

Ancaster, ON L9G 4N3

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any lawful purpose.

**ARTICLE IV SHARES**

The number of shares of stock is: 10,000 shares of common stock, no par value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Steve Grzenda, Director

Name and Title: \_\_\_\_\_

Address 109 Seymour Drive

Address: \_\_\_\_\_

Ancaster, ON L9G 4N3

Name and Title: Steve Grzenda, President

Name and Title: \_\_\_\_\_

Address 109 Seymour Drive

Address: \_\_\_\_\_

Ancaster, ON L9G 4N3

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA  
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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: United Corporate Services, Inc.  
Address: 9200 South Dadeland Boulevard  
Miami, Florida 33156

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Diane Damiano, United Corporate Services  
Address: 100 State Street, Suite 800  
Albany, NY 12207

**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*

Michael A. Barr  
Required Signature/Registered Agent

09/06/17  
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.*

Diane M. Damiano  
Required Signature/Incorporator

09/06/17  
Date

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