

P170000 89322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

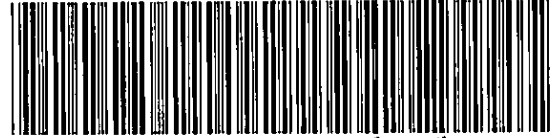
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T. SCOTT



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11/07/17--01003--004 **70.00

11/07/17 11:00 AM

17 NOV - 7 AM 9:16

APPROVED
11/07/17

COVER LETTER

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

SUBJECT: Flynn Enterprises Incorporated

(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: Kathleen M Flynn
Name (Printed or typed)

4807 Sunset Court Unit 701
Address

Cape Coral, FL 33904
City, State & Zip

239-699-2733
Daytime Telephone number

paradiseprosl@aol.com
E-mail address: (to be used for future annual report notification)

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

November 1, 2017

Department of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Reference Flynn Enterprises Incorporated

Florida Document number P10000058434

Dear Department:

It has come to our attention that our corporation was administratively dissolved for non payment of the annual report fees.

At this time we are asking the department to release our florida document number P10000058434.

I am also enclosing new articles that I would ask the department to file on our behalf at this time.

Thanking you for your assistance with these matters.

Sincerely,

A handwritten signature in cursive script, appearing to read "Kathleen Flynn", with a long horizontal flourish extending to the right.

Kathleen Flynn
Vice President

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: FLynn Enterprises Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address
4807 Sunset Court

Unit 701

Cape Coral, FL 33904

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business pertaining to investment property purchase and sale.

ARTICLE IV SHARES

The number of shares of stock is: 1000 shares @ \$1.00 par value per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Heinz Schaefer

Address: 1032 SE 43rd Street

Cape Coral, FL 33904

Name and Title: P

Address: _____

Name and Title: Kathleen M Flynn

Address: 4807 Sunset Court

Unit 701

Cape Coral, FL 33904

Name and Title: VP

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

NOTARIAL PUBLIC
STATE OF FLORIDA

17 NOV - 7 AM 9:16

APPROVED
AND
FILED

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: Kathleen M Flynn
Address: 4807 Sunset Ct Unit 701
Cape Coral, FL 33904

ARTICLE VII INCORPORATOR

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

Name: Kathleen M Flynn
Address: 4807 Sunset Ct Unit 701
Cape Coral, FL 33904

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

Kathleen M Flynn 11/1/2017
Required Signature/Registered Agent 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.

Kathleen M Flynn 11/1/2017
Required Signature/Incorporator Date