

P18000019204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

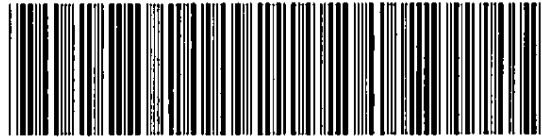
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 FEB 28 PM 3:26
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COVER LETTER

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

SUBJECT: LRP ENTERPRISES Auto 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: Jesse Huseman
Name (Printed or typed)

5871 NIGHTINGALE LOOP UNIT 1
Address

TALLAHASSEE, FL 32311
City, State & Zip

850-591-0444
Daytime Telephone number

Jesse.Huseman@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)

ARTICLE I NAME

The name of the corporation shall be: LRP ENTERPRISES AUTO INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

218 Glenbrooke CT

Tallahassee, Fl. 32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all Lawful business permitted by Florida law.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LeeRoy Pafford President

Name and Title: Jesse Huseman Vice President

Address 218 Glenbrooke Ct

Address: 5871 Nightingale Loop unit 1

Tallahassee, Fl.

Tallahassee, Fl.

32317

32311

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Jesse Huseman
Address: 5871 Nightingale Loop Unit 1
Tallahassee, FL 32311

ARTICLE VII INCORPORATOR

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

Name: Jesse Huseman
Address: 5871 Nightingale Loop Unit 1
Tallahassee, FL 32311

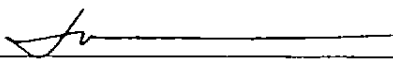
ARTICLE VIII EFFECTIVE DATE:

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

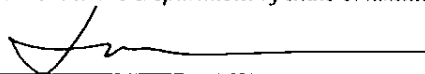
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 2/27/18
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.

 2/27/18
Required Signature/Incorporator Date