

PI900000008241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

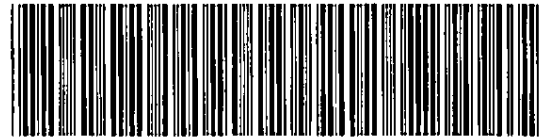
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 JAN 22 PM 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

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

**SUBJECT:** LTZR ENTERPRISES 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:** ERIC SEIDEN

Name (Printed or typed)

12670 YARDLEY DRIVE

Address

BOCA RATON FL 33428

City, State & Zip

954-913-6766

Daytime Telephone number

ERICSEIDEN71@GMAIL.COM

E-mail address: (to be used for future annual report notification)

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

1/3/2019

Florida Department of State  
Divisions of Corporations, Clifton Bldg  
2661 Executive Center Circle  
Tallahassee FL 32301

**Re: LTZR ENTERPRISES INC**  
**DOC # P1700007193**

To whom it may concern:

Please find enclosed the Articles of Incorporation and check 1098 for processing regarding LTZR Enterprises Inc. I, Eric Seiden, President of LTZR Enterprises Inc have no plans to reinstate this company, but would like the Articles of Incorporation processed on as soon as possible. I understand the effective date will reflect year 2019.

Please process this request at your earliest convenience, should you have any further questions, please do not hesitate to contact me at 954-913-6766.

Sincerely,



Eric Seiden,  
President  
LTZR Enterprises, Inc

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TALLAHASSEE, FL

**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: LTZR ENTERPRISES, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
12670 YARDLEY DRIVE

BOCA RATON FL 33428

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY & ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: ERIC SEIDEN, P

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

Address

12670 Yardley Drive  
Boca Raton FL 33428

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

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

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

Address

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

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

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

Address

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

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TALLAHASSEE, FL

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: ANTHONY G COLEMAN, JR  
Address: 2151 W HILLSBORO BLVD, STE 206  
DEERFIELD BEACH FL 33442

**ARTICLE VII INCORPORATOR**

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

Name: COLEMAN & COHEN LLC  
Address: 2151 W HILLSBORO BLVD, STE 206  
DEERFIELD BEACH FL 33442

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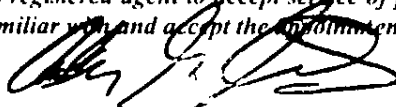
**ARTICLE VIII EFFECTIVE DATE:**

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*

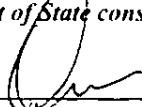


Required Signature/Registered Agent

01/04/19

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

01/04/19

Date