

P20000077017

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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## COVER LETTER

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

SUBJECT: Leo and Leo Security 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: Michael J. Leo  
Name (Printed or typed)

7168 Copperfield Circle  
Address

Lake Worth, Florida 33467  
City, State & Zip

561-377-6960  
Daytime Telephone number

m/leo25@comcast.net  
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: Leo and Leo Security Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

7168 Copperfield Circle

Lake Worth, Florida 33467

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide security  
and off duty police services

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael J. Leo - president Name and Title: \_\_\_\_\_

Address 7168 Copperfield Cir Address: \_\_\_\_\_  
Lake Worth, FL 33467

Name and Title: Audrie M. Leo - vice president Name and Title: \_\_\_\_\_

Address 7168 Copperfield Cir Address: \_\_\_\_\_  
Lake Worth, FL 33467

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

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

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

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

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**ARTICLE VI REGISTERED AGENT**

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

Name: Michael J. Leo

Address: 7168 Copperfield Circle  
Lake Worth, FL 33467

**ARTICLE VII INCORPORATOR**

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

Name: Michael J. Leo

Address: 7168 Copperfield Circle  
Lake Worth, FL 33467

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 9/8/2020 (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 J. Leo

Required Signature/Registered Agent

9/6/20

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.*

Michael J. Leo

Required Signature/Incorporator

9/6/20

Date

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