

P200000 83405

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

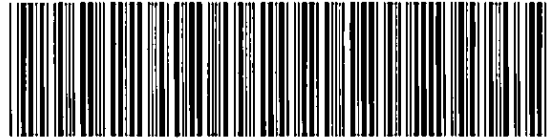
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LORI' B, INC.

Signature

Requested by: SETH

10/20/20

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File

LTD Partnership File

Foreign Corp. File

L.C. File

Fictitious Name File

Trade/Service Mark

Merger File

Att. of Amend. File

RA Resignation

Dissolution / Withdrawal

Annual Report / Reinstatement

Cert. Copy

Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

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: LORI' B, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5103 YELLOW PINE LANE

TAMARAC, FLORIDA 33319

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LOREN B. GRAHAM/PRESIDENT

Name and Title: NORMA DANIEL/VICE PRESIDENT

Address 5103 YELLOW PINE LANE

Address: 5716 A BAYBERRY LANE

TAMARAC, FLORIDA 33319

TAMARAC, FLORIDA 33319

Name and Title: MARSHA DANIEL/SECRETARY

Name and Title: _____

Address 5716 A BAYBERRY LANE

Address: _____

TAMARAC, FLORIDA 33319

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF COURT

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: LOREN B. GRAHAM
Address: 5103 YELLOW PINE LANE
TAMARAC, FLORIDA 33319

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LOREN B. GRAHAM
Address: 5103 YELLOW PINE LANE
TAMARAC, FLORIDA 33319

ARTICLE VIII EFFECTIVE DATE:

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

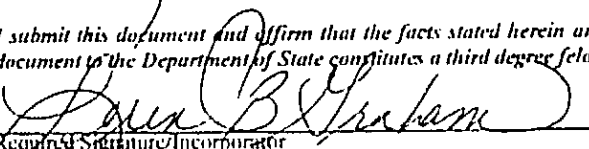
(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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

 09/02/2020
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.

 09/02/2020
Required Signature/Incorporator Date