

P22000004078

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000027671 3)))



H220000276713ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : POWELL, JACKMAN, STEVENS & RICCIARDI, P.A.
Account Number : 120170000034
Phone : (239)689-1096
Fax Number : (239)791-8132

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: legal@your-advocates.org

FLORIDA PROFIT/NON PROFIT CORPORATION
LEHIGH SEPTIC, INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

SECRETARY OF STATE
DIVISION OF CORPORATIONS
FLORIDA

2022 JAN 21 AM 11:23

FILED

2022 JAN 21 PM 12:42

Date: 01/18/2022

To the Division of Corporations:

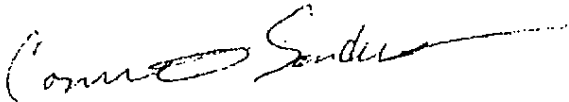
Reference: Lehigh Septic, Inc. Doc P94000019884

Dear Department,

It has come to my attention that my company's annual report has not been filed and my company has been dissolved. As the owner of Lehigh Septic, Inc. I would like to at this time release my document number P94000019884

I am enclosing a new set of articles to be filed with the state. Thank you in advance with your help in this matter.

Regards:



Connie Sanders

OBO: Lehigh Septic, Inc

SECRETARY OF STATE
MASSACHUSETTS
FILED

2022 JAN 21 AM 11:29

FILED

COVER LETTER

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

SUBJECT: Lehigh Septic, 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: Connie Sanders
Name (Printed or typed)
22081 Tuckahoe Rd
Address
Alva, FL 33920
City, State & Zip
239 738-3444
Daytime Telephone number
Kathleen@ParadiseINTLTax.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32314

2022 JAN 21 AM 11:20

FILED

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: Lehigh Septic, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
22081 Tunkahoe Road
Alva, FL 33920

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 waste disposal

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares @ \$1⁰⁰ Par value Per Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: David Sanders PD

Address: 22081 Tunkahoe Rd
Alva FL 33920

Name and Title: Connie Sanders S

Address: 22081 Tunkahoe Rd
Alva FL 33920

Name and Title: Simon Moritz VP

Address: PO Box 487
Alva FL 33920-0487

Name and Title:

Address:

Name and Title:

Address:

FILED

2022 JAN 21 AM 11:28
CLERK 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: Kathleen Flynn
Address: 1314 Cape Coral Pkwy E Ste 208
Cape Coral, FL 33904

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Connie Sanders
Address: 22081 Turquoise Rd
ALVA, FL 33920

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 certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Kathleen Flynn
Required Signature/Registered Agent

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.

Connie Sanders
Required Signature/Incorporator

Date

Date

1/18/2022
1/18/2022

FILED

2022 JAN 2 AM 11:28
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA