P24000053400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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FLORIDA

COVER LETTER

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

SUBJECT: Lowe & Lowe Enterprise 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: Lowe & Lowe Enterprise INC
Name (Printed or typed)

290 Palmetto Springs St
Address

Debary, FL 32713
City, State & Zip

321-749-5263
Daytime Telephone number

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: Love & Love Enterprise INC

ARTICLE II PRINCIPAL OFFICE
Principal street address: 290 Palmetto Springs St Debary, FL 32713

Mailing address, if different is: 290 Palmetto Springs St Debary, FL 32713

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Any and all lawful purpose

ARTICLE IV SHARES
The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Devin Love director
Address 290 Palmetto Springs St Debary, FL 32713

Name and Title: _____
Address _____

Name and Title: _____
Address _____

Name and Title: _____
Address _____

Name and Title: _____
Address _____

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: Linell Devon Lowe

Address: 290 Palmetto Springs St
DeLand, FL 32713

ARTICLE VII INCORPORATOR

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

Name: Linell Devon Lowe

Address: 290 Palmetto Springs St
DeLand, FL, 32713

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

Linell Devon Lowe
Required Signature/Registered Agent

8/20/24
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.

Linell Devon Lowe
Required Signature/Incorporator

Date 8/20/24