

**\$300.00** Total Fee for the State, Corporate Book, and Express NonLawyer.  
Additional fees for names longer than 43 characters

## CORPORATION INFORMATION

***IT IS IMPORTANT THAT YOU DO NOT ADVERTISE YOUR NAME UNTIL  
IT IS CONFIRMED TO YOU BY THE STATE OF FLORIDA.***

Once this corporation is activated with the State the Corporation must file an Annual Report with the State of Florida Division of Corporations between January 1st and May 1st of every year to maintain "active" status. The corporation's first annual report will be due between January 1st and May 1st of the calendar year following the year the corporation is formed and can be filed online at [www.sunbiz.org](http://www.sunbiz.org) or contact the State of Florida Division of Corporations at [850-245-6059](tel:850-245-6059). The fee to file a Corporation Annual Report is \$150. A \$400 late fee is applied if the report is filed after May 1st. File early to avoid the late fee. \_\_\_\_\_

1. Names, addresses and phone numbers of all initial DIRECTORS of the corporation:

<u>Name</u>	<u>Address/City/State/ Zip</u>	<u>Phone #</u>
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<u>Name</u>	<u>Address/City/State/ Zip</u>	<u>Phone #</u>
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<u>Name</u>	<u>Address/City/State/ Zip</u>	<u>Phone #</u>
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### 2. Desired name of corporation

(Please list three choices in the event the desired name is not available) Name must include suffix such as "Corp", "Inc.", "Incorporated", etc.

1<sup>st</sup> choice: \_\_\_\_\_

2<sup>nd</sup> choice: \_\_\_\_\_

3<sup>rd</sup> choice: \_\_\_\_\_

3. **Number of shares of common stock** \_\_\_\_\_ @ \$ \_\_\_\_\_ value per share of stock

4. **Desired length of Existence of Corporation:** (Circle One)

perpetual (until you chose to dissolve) or specific amount of time from \_\_\_\_\_ to \_\_\_\_\_

5. **Business address** (*Must be a Florida street address. A post office box is not acceptable. You may also want to check with the city and county prior to use of an address to ensure there are no conflicts with the use of that address for the intended business purposes*):

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6. **Mailing Address:**

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7. **Name and Address of Registered Agent:** *A registered agent is the person that will accept service of process on behalf of a business entity. The registered office is the address where the registered agent is located during normal business hours. The registered office address must be a Florida street address. A post office box is not acceptable.*

Name

Address/City/State/ Zip

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8. **Name and address of Incorporator whom will be signing the Articles of Incorporation:**

Name

Address/City/State/ Zip

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9. **Purpose of the corporation:** (Circle one)

Any and all lawful

**OR**

\_\_\_\_\_   
 List Specific Purpose

### **RELEASE OF LIABILITY**

I have been informed by the Staff of Express L C L Services, Inc. d/b/a Express NonLawyer that:

(1) They ARE NOT ATTORNEYS, & they CANNOT GIVE LEGAL ADVICE.

(2) They are only assisting me in the proper preparation of these documents so that I can represent myself in this matter without an attorney.

They have further informed me that legal representation by an attorney would advise me of all legal rights that I may have arising out of this action.

The legal documents prepared by Express L C L Services, Inc. d/b/a Express NonLawyer, have been prepared in accordance with the information provided by me in my desire to represent myself in this transaction.

I declare:

- (1) That the information provided by me is true and complete to the best of my knowledge and belief;
- (2) That I agree to review all documents prepared and my signature is acknowledgment of my approval of all documents;
- (3) That I hereby release Express L C L Services, Inc. d/b/a Express NonLawyer, from any liability arising out of the services performed for me by them as the result of my failure to provide the information requested or to thoroughly review all documents. I further declare that I am signing this document without undue influence, threat or pressure from any person or entity involved in the outcome of this transaction.
- (4) I understand that any and all payments made to Express L C L Services, Inc. d/b/a Express NonLawyer, for the preparation of any documents are non-refundable and that I have been informed that I must pick up my documents within 90 days of completion or the documents may be destroyed and/or I may incur additional fees as determined applicable by the Staff of Express L C L Services, Inc. d/b/a Express NonLawyer.

Dated \_\_\_\_\_ Signature \_\_\_\_\_