

TRANSMITTAL LETTER

PO000067297

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

SUBJECT: LOBUST GROVE COMPANIES, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700003322727--6

-07/14/00--01001--015

****175.00 *****87.50

Enclosed is 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: ROSA SHAW
Name (Printed or typed)

6970 Carlyle Ave
Address

Miami Beach, Fl. 33141
City, State & Zip

305-866-1364
Daytime Telephone number

RECEIVED
59 JUL 13 PM 3:32
DIVISION OF CORPORATION

FILED
00 JUL 13 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

Will Wait

ARTICLES OF INCORPORATION

1. The name of the corporation shall be :

Locust Grove Companies, Inc.

2. The principal place of business and mailing address of the corporation is :

6971 Indian Creek Drive
Miami Beach, Fl. 33141

3. The corporation shall have the authority to issue 1,000 shares of stock.

4. The registered agent of the corporation is Rosa Shaw and the registered street address
6971 Indian Creek Dr. Miami Beach. Fl. 33141

5. The initial Board of Directors shall have 3 members whose name and address are as follows:

Louis W. Coyne

Carmen Diaz

John Graves

6971 Indian Creek Dr. Miami Beach. Fl. 33141

the number of Directors may be raised or lowered by amendment of the by laws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Rosa Shaw, 6971 Indian Creek Dr. Miami Beach, Fl. 33141

Dated: July 12,2000



Rosa Shaw

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated: Jul 12, 2000



Rosa Shaw, Register Agent

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JUL 13 PM 3:42

FILED