

PO 4000 153237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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:

Legal Forms and Solutions, Corp.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4995 N.W. 72 Street Suite 410  
Miami Florida 33166

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Assisting in the completion of forms

**ARTICLE IV SHARES**

The number of shares of stock is:

100 at .01 par value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Jose Fortuno 15065 S.W. 49 Lane, Suite F Miami Fl 33185 President  
Lilliam Manito 15065 S.W. 49 Lane, Suite F Miami Fl 33185 Vice President / Secretary

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Jose Fortuno 15065 S.W. 49 Lane, Suite F Miami, FL 33185

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Jose Fortuno 15065 S.W. 49 Lane, Suite F Miami, FL 33185

\*\*\*\*\*  
*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*

  
\_\_\_\_\_  
Signature/Registered Agent

11/02/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/02/04  
\_\_\_\_\_  
Date

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