## #06000015917

(Req	juestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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## **COVER LETTER'**

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

SUBJECT: Legal Research	Services Ce	nter Inc.
· ·		
Enclosed are an original and one (1) copy of the arti	icles of incorporation and	l a check for:
Filing Fee Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED
	JEZ (Printed or typed) 4 4/6/98 Address	
Miami Bo	each, FL 331 State & Zip	8/
786-251-6 Daytime T	217 Telephone number	

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

ARTICLES OF INCORPORATION	0~	<i>7</i> 1.
In compliance with Chapter 607 and/or Chapter 621, F.S. (Pro-	ofit) $D_{IV_{IS/O}}^{SECI}$	医温度性 一
ARTICLE I NAME	20	
The name of the corporation shall be:	90 JAH	27 Aug 1/10
Legal Research Services Center	- Inc.	27 AH 10: 25
ARTICLE II PRINCIPAL OFFICE	Addiess	
The principal place of business/mailing address is: 12550 Biscayne Blvd. Suite 500	Mailing Address	
12500 BISCAYNE BIVA. SUITE SUC	DO BOX AIRIAS	
North Miami, FL 33/81	Miami Beach FL 33181	
ARTICLE III PURPOSE	7-1,011	
The purpose for which the corporation is organized is:	· / · · · · · · · · · · · · · · · · · ·	
professional services, profess.	ional corporation	
ARTICLE IV SHARES		
The number of shares of stock is:		
1,00 per share of stock		
ARTICLE V INITIAL OFFICERS AND/OR DIREC	CTORS	0 '1
List name(s), address(es) and specific title(s):	Elliott Giraud, Vi	ce Preside
Susana Vazquez, President	Ellioti Gi	
P.O. BOX 416198	P. O. BOX 416198	1
Miam Beach, FL 33181	Miami Beach, FL 33181	
r		
ARTICLE VI REGISTERED AGENT	110.00	
The <u>name and Florida street address</u> (P.O. Box NOT accepta	ble) of the registered agent is:	
Susana Vazquez 12985 Coronado TR		
North Miumi FL 3318 1		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:		
Sussing Valacilla		
Susana Vazquez P.O. BOX 416198		
Migmi Beach FL 33181		
*****************	*********	****
Having been named as registered agent to accept service of process for th certificate, I am familiar with and accept the appointment as registered age.	e above stated corporation at the place designt and agree to act in this capacity	gnated in this
4/60	1/23/1/2	
Signature/Registered Agent		
	1-2/21	
Signature/incorpolator	- <u> </u>	
	/ Date	
Susana Vazquez		