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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
LILINGA CORP.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

12 OCT 11 AM 10:55

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 OCT 11 PM 2:14

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Electronic Filing Menu Corporate Filing Menu Help

gn 10/12/12

COVER LETTER

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

SUBJECT: LILINGA CORP.
(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: Jorge E. Otero, Esq.
Name (Printed or typed)

75 Valencia Avenue, Fourth Floor
Address

Coral Gables, FL 33134
City, State & Zip

305-567-9000
Daytime Telephone number

jeo@oterolaw.com
E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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DIVISION OF CORPORATIONS

12 OCT 11 AM 10:55

ARTICLE I NAME LILINGA CORP.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1121 Crandon Blvd., Unit D808
Key Biscayne, FL 33149

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
All lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 10,000 shares.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andres Rocha, Director Name and Title: _____
Address: 1121 Crandon Blvd., Unit D808 Address: _____
Key Biscayne, FL 33149 _____

Name and Title: _____ Name and Title: _____
Address: _____ 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: Jorge E. Otero & Associates, P.A.
Address: 75 Valencia Ave., Fourth Floor
Coral Gables, FL 33134

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jorge E. Otero, Esq.
Address: 75 Valencia Ave., Fourth Floor
Coral Gables, FL 33134

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]
Required Signature/Registered Agent

10-11-12
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.

[Signature]
Required Signature/Incorporator

10-11-12
Date