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TRANSMITTAL LETTER

FILED
00 JUN -1 PM 3:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: LWS RISK CONTROL CORP.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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:

Maximilian Schenk

Name (Printed or typed)

542 St. Andrews Blvd.

Address

Naples, FL 34113

City, State & Zip

(941) 642-9702

Daytime Telephone number

100003274161--2

-06/01/00--01088--009

*****87.50 *****87.50

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

D. BROWN JUN - 9 2000

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: LWS Risk Control Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 542 St. Andrews Blvd.
Naples, FL 34113

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: consulting and project
management

ARTICLE IV SHARES

The number of shares of stock is: 50

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): Lothar W. Schenk, president
Stephan W. Schenk, vice president
Maximilian J. Schenk, secretary

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: Maximilian J. Schenk
542 St. Andrews Blvd.
Naples, FL, 34113

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lothar W. Schenk
346 Kendall Dr.
Marco Island, FL 34145

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

Date

Signature/Incorporator

Date

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