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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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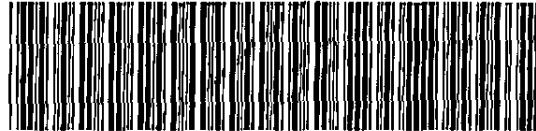
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05 AUG 15 AM 8:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8/17/05  
BWK

## TRANSMITTAL LETTER

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

**SUBJECT:** LM Software, Inc.

(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Luis Montalvo

Name (Printed or typed)

11945 NW 12th Street

Address

Pembroke Pines, FL 33026

City, State & Zip

(305) 343-3805

Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

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

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TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

LM Software, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

11945 NW 12th Street  
Pembroke Pines, FL 33026

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Software Consulting

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

Luis Montalvo	11945 NW 12th Street, Pembroke Pines, FL 33026	President
Clara Calad	11945 NW 12th Street, Pembroke Pines, FL 33026	Vice-President

**ARTICLE VI REGISTERED AGENT**

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

Luis Montalvo  
11945 NW 12th Street  
Pembroke Pines, FL 33026

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Luis Montalvo  
11945 NW 12th Street  
Pembroke Pines, FL 33026

\*\*\*\*\*

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

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

08/11/2005  
\_\_\_\_\_  
Date

08/11/2005  
\_\_\_\_\_  
Date