F9900006653

LRA, inc. PO BOX 1448 BONJTA SPRJNGS, FL 34135-1448

800003040678--1 -11/10/99--01035--003 *****87.50 ******87.50 w99-26163

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	(Corporation Name)	(Document #)	· · · · · · · · · · · · · · · · · · ·
2.	(Corporation Name)	(Document #)	· 145 45 37
3.	(Corporation Name)	(Document #)	
4.	(Corporation Name) Walk in Pick up time Mail out Will wait	(Document #)	T T T T T
	NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS The state of the st	nta 2/27
	Other OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	
		Examiner's Initials	



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

December 6, 1999

LAURIE MULLAY PO BOX 1448 BONITA SPRINGS, FL 34135-1448

SUBJECT: LRA, INC.

Ref. Number: W99000026163

Harris of State Of CATION COMP

BY FOREIGN

TO BUSINESS

TO BUSINESS

We have received your document for LRA, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You cannot adopt an alternate on name registrations when the name is note avaliable you have two choices either send a new certificate with a different or you can request a refund.

Please return your document, along with a copy of this letter, within 60 days or

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 699A00057290



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 16, 1999

LAURIE MULLAY PO BOX 1448 BONITA SPRINGS, FL 34135-1448

SUBJECT: LRA, INC.

Ref. Number: W99000026163

We have received your document for LRA, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Now you would need to resubmit the affidavit to adopt an alternate name. I did receive your application for a foreign corporate registration.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 699A00059

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: LRA IDC.	
(Name of corporation - must include suffix)	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
LAURIE MULLAY	
LRA, IVC.	*i.5
(Firm/Company)	' # T .s.
	_
(Address)	
- MOVITA SPRINGS F1 34135-14 12 22 E	
(City/State/Zip) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	:
Should you need to call company and the sall compan	
Should you need to can someone concerning this matter, please call:	
(Name of Person) at (941) 219-8282 (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
STREET ADDRESS: MAILING ADDRESS:	-
Qualification/Tax Lien Section Qualification/Tax Lien Section	
Division of Corporations 409 E. Gaines St. Division of Corporations P.O. Box 6327	
Tallahassee, FL 32399 Tallahassee, FL 32314	
Enclosed is a check for the following amount: (alteredy left)	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy	-
Colimica Copy	

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned $\frac{LAUR/2}{(Name)}$ $\frac{MU/AY}{(Name)}$, do hereby certify	es e esta e e
that this Resolution of the Board of Directors of	
Corporate Name)	
a corporation duly organized and existing under the laws of the State of	
was duly adopted on <u>Jecember</u> 19 Employer	نسب نے معالمہ محق نے فران
Be it resolved, that	
organized and existing in the State of <u>DETAWARC</u> , hereby adoption than to DETAWARC. for use in Florida.	TENERAL SE
Dated: 12/19/99	· :
Signeture of either Chairman, Vice Chairman or any officer	
LAURIE MULLAY	· · · · · · · · · · · · · · · · · · ·
Type or print name /	•

INHS19(4/96)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
LRA FIR.	
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or	
words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a	
natural person or partnership if not so contained in the name at present.)	
2. UCIAWARC 3. US-095691 (FEI number, if applicable)	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 10/22/99 5. FELETUAL (Date of incorporation) [Duration: Year corp. will cease to exist or "perpetual")	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	. ,
$_{6}$ $^{10}/23/99$	
(Date first gransacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. P.D. BOX 1448	
BONITA SPRINGS F1 34135-1448	₩ -
(Current mailing address)	===================================
J. J.	
8. HOLDING CA. F.	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name: LAURIE MULLAY . 75 & 0	
Office Address: 12698 FOX KIDGE DR PR	
MANITA SORIURS - 2/12C	
WONITA SPRINGS, Florida, 34/35 (Zip code)	;=
10. Registered agent's acceptance:	
Wanting to an area of a second and a second	
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply	!
with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept	:
the obligations of my position as registered agent.	
	: <u></u>
(Registered agent's signature)	-
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the	•
Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.	
minor it is incorporated.	-
ATTACHED.	

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

	CCTORS (Street address only - P.O. Box NOT acceptable)
Chairman	- LAURIE MULLAY
Address:	12698 FOX Lidge JR.
_	DONITA SPRINGS, F/ 34135
Vice Chair	rman:
	The state of the s
_	
Director:	
_	
Director: _	
Address: _	1
B. OFFIC	CERS (Street address only - P.O. Box NOT acceptable)
President:	LAURIE Mullay
Address: _	LAGIS FOX Ridge DK.
_	DONITA SPRINGS, FI 34135 ME M
Vice Presid	lent:
Address: _	
_	
Secretary: _	
Address:	
Treasurer:	
Address:	
NOTE: M	Decessary your ray attach an addendary at the control of the contr
13.	necessary, you may attach an addendum to the application listing additional officers and/or directors.
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. LA	ULIE MUNAY DIRECTOR
	(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LRA, INC." IS DULY INCORPORATED
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING
AND HAS A LEGAL CORPORATE EXISTENCE SO EAR AS THE RECORDS OF
THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF OCTOBER, A.D.
1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID_"LRA, INC."

WAS INCORPORATED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

99 DEC 22 AM 2: 27
SECRETARY OF STATE
NHASSFE, FLORIDA

3114943 8300

991453344



Edward J. Freel, Secretary of State 6422

AUTHENTICATION:

10-26-99

DATE: