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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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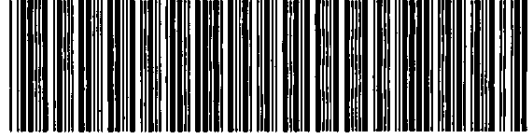
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TULSA, OKLAHOMA

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COVER LETTER

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

SUBJECT: LightXplosion, Inc

(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

ADDITIONAL COPY REQUIRED

FROM: Shane Northrop

Name (Printed or typed)

13700 Six Mile Cypress Pkwy Ste 2

Address

Fort Myers, FL 33912

City, State & Zip

(239) 271-2488

Daytime Telephone number

shane@northropfinancial.com

E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: LightXplosion, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street and Mailing address is:

644 Central St E
Lehigh Acres, FL 33974

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Upon the dissolution of the corporation, after paying or making provisions for the payment of all the legal liabilities of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed:

As provided for in the bylaws.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Craig Hunt, President
Address: 644 Central St E
Lehigh Acres, FL 33974

Name and Title: Noah Traficanti, Treasurer
Address: 644 Central St E
Lehigh Acres, FL 33974

Name and Title: Sheanna Hunt, Vice President
Address: 644 Central St E
Lehigh Acres, FL 33974

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TALLAHASSEE, FL 32399

ARTICLE VI REGISTERED AGENT

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


Name: Northrop Financial Group, LLC
Address: 13700 Six Mile Cypress Pkwy.
Suite 2
Fort Myers, FL 33912

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

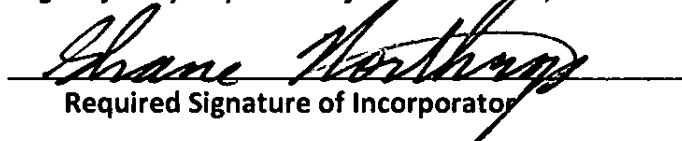
Name: Shane Northrop, CPA
Address: 13700 Six Mile Cypress Pkwy.
Suite 2
Fort Myers, FL 33912

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


Required Signature of Registered Agent

3/10/2015
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any 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.


Required Signature of Incorporator

3/10/2015
Date