

TRANSMITTAL LETTER

P 000000001310

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

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-12/29/99--01015--012

*****78.75 *****78.75

LEFRANG, INC.

SUBJECT:

(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 DEC 29 PM 2:06

FILED

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:

MARTHA D'LIRA

Name (Printed or typed)

7332 S.W 42nd STREET

Address

MIAMI, FLORIDA 33155

City, State & Zip

786-897-6262

Daytime Telephone number

F. CHESLER JAN 5 1999

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LEFRANG, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7332 S.W 42 ST
MIAMI, FLORIDA 33155

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES (ONE HUNDRED SHARES)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MARTHA D'LIRA
7332 S.W 42 ST.
MIAMI, FLORIDA 33155

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

MARTHA D'LIRA
7332 S.W 42ND STREET
MIAMI, FLORIDA 33155



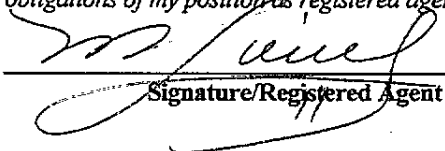
Signature/Incorporator

12-27-99

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent



Signature/Registered Agent

12-27-99

Date

FILED
69 DEC 29 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA