P4000099687

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

·	ruu00343537			
SUBJECT:	L.A. HOFFMAN	being INC	-10/23/0001 ******78.75	.0860 ******
	(Proposed corpor	rate name - must include su	ffix)	
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	-	HOFFMAN		
_	Name (Printed or typed)		TASE B	
		N POINT DRIVE	DCT 2	, =
	Address			FILED
_	TREASURE ISLAND, FL 33706 I		33706 FG.	
	Name (Printed or typed) HAVEN POINT DRIVE Address TREASURE ISLAMS, FL 33706 ISS TOTAL City, State & Zip			59
		367-0389		
_	Daytime Te	elephone number	·· ····	

10,00

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:

L. A. HOFFMAN GROUP, INC.

ARTICLE II PRINCIPAL OFFICE

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

463 HAVEN POINT DEIVE TREASURE ISLAND FL 33706

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

L.A. HOFFMAND HES HANEN POINT DRIVE TREASURY ISLAND, FL 3370L

ARTICLE V INCORPORATOR

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

HOS HOVEN POINT DRIVE TREASURY ISLAND, FC 33706

Signature/Incorporator

29-29-2000

(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

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