

TRANSMITTAL LETTER

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

500003435645--6
-10/23/00--01107--021
*****87.50 *****87.50

SUBJECT: L \$ T Health Services
(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 \$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: Nadege Lanoue / Gerald Telasco
Name (Printed or typed)

9043 VINEYARD LAKE DR.
Address

PLANTATION - FLORIDA - 33324
City, State & Zip

954-530-1320
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 OCT 23 AM 11:06

FILED

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

Feb 10/24

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LBT Health Services INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9043 Vineyard Lake Dr.
Plantation, Florida 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Health Services

ARTICLE IV SHARES

The number of shares of stock is:

ten = 10

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

NADEGE LANOUE
9043 Vineyard Lake Dr.
Plantation - Florida 33324

Gerald Telasco

9043 Vineyard Lake Dr.
Plantation, Florida 33324

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

NADEGE LANOUE
9043 VINEYARD LAKE DR.
PLANTATION FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JASON NOEL
344 SE 11AVE APT 9
Pompano Bch FL 33060

Inc.

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

Gerald Telasco

Date

10-17-00

Signature/Incorporator

JASON NOEL
RA.

Date

10-17-00

FILED
00 OCT 23 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA