

P01000009949

TRANSMITTAL LETTER

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

SUBJECT: Living Barrier Free, Corp.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400003572764--9
-01/24/01--01040--024
*****87.50 *****87.50

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: Lisa Waggener & Laura Polsky
Name (Printed or typed)

8107 SW 19 Street
Address

North Lauderdale, FL 33068
City, State & Zip

954 726-3561
Daytime Telephone number

FILED
01 JAN 25 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FL 32314

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

1-26-01

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: *Living Barrier Free, Corp.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*8107 S.W. 19 Street
N. Lauderdale, FL 33068*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide architectural barrier modifications to those persons with disabilities, in order for them to remain in their 'current living environment.

ARTICLE IV SHARES

The number of shares of stock is:

1 share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*Laura Polsky 8107 SW 19 Street, N. Laud, FL 33068
Lisa Waggener 8107 SW 19 Street, N. Laud, FL 33068*

ARTICLE VI REGISTERED AGENT

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

*Lisa Waggener
8107 SW 19 Street
N. Laud, FL 33068*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Laura Polsky 8107 SW 19 Street, N. Lauderdale, FL 33068
Lisa Waggener 8107 SW 19 Street, N. Lauderdale, FL 33068*

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TALLAHASSEE, FL 32304

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

Lisa Waggener
Signature/Registered Agent

1/22/01
Date

Laura Polsky / Lisa Waggener
Signature/Incorporator

1/22/01
Date