Division of Corporations



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### Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FILINGS, INC. Account Number : 072720000101 Phone : (850)385-6735

Fax Number : (954)641-4192

### FLORIDA PROFIT CORPORATION OR P.A.

LEGAL SOLUTIONS OF AMERICA. INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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#### ARTICLES OF INCORPORATION

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#### LEGAL SOLUTIONS OF AMERICA, INC.

ARTICLE I

The name of the corporation shall be:

LEGAL SOLUTIONS OF AMERICA, INC.

# ARTICLE II PRINCIPAL OFFICE

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

4172 Miracle Plaza Fort Myers, Florida 33901

ARTICLE III
DURATION

This corporation shall have perpetual existence.

ARTICLE IV

This corporation is organized for the purpose of any lawful business in the state of Florida.

#### ARTICLE Y CAPITAL STOCK

This corporation is authorized to issue One Thousand shares of One Dollar (\$1.00), par value common stock.

SECRETARY OF STATE DIVISION OF CORPORATION

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#### ARTICLE VI PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

#### ARTICLE VII INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial registered office of this corporation is:

4172 Miracle Plaza Fort Myers, FL 33901

and the name of the initial registered agent of this corporation at that address is:

Anthony Higgs

## ARTICLE VIII INITIAL BOARD OF DIRECTORS, OFFICERS

This corporation shall have four (4) Directors who shall also serve as officers of the corporation. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The name and address of the Director and officer is as follows: Barry Goldberg, Anthony Higgs, Christopher Smyth and Victor Pasek, 4172 Miracle Plaza, Fort Myers, Florida 33901

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## ARTICLE VIII INCORPORATOR

The name and address of the Incorporator signing these Articles is:

Anthony Higgs 4172 Miracle Plaza Fort Myers, Florida 33901

# ARTICLE IX INDEMNIFICATION

The corporation shall indemnify any officer, director, or any former officer or director, to the full extent permitted by law.

# ARTICLE X

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

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STATE OF FLORIDA	)
	) 85.
COUNTY OF LEE	_)

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared ANTITANY HOUSE who produced FL-DANOL Mouse as Identification and to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

NOTARY PUBLIC, State of Florida

(SEAL)

My Commission Expires: 67-04-2004



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#### CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is

LEGAL SOLUTIONS OF AMERICA, INC.

The name and address of the registered agent and office is:

Anthony Higgs 4172 Miracle Plaza Fort Myers, Florida 33901

> Signature: Anthony

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:

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