

TRANSMITTAL LETTER

**P020000016292**

FILED

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

02 FEB -8 AM 9:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

500004895925--3

-02/08/02--01027--004

\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: LEGACY INTERIORS and GIFTS, inc.  
(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  
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: ALLEEN LASCALA  
Name (Printed or typed)

2700 CYPRESS ISLAND DR.  
Address

PALM BEACH GARDENS, FL 33410  
City, State & Zip

561-743-2944  
Daytime Telephone number

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

J. BRYAN FEB 13 2002

# 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:

LEGACY INTERIORS and GIFTS, inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2700 CYPRESS ISLAND DR.  
PALM BEACH GARDENS, FL 33410

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INTERIOR FURNITURE

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ALLEEN LASCALA  
2700 CYPRESS ISLAND DR.  
PALM BEACH GARDENS, FL 33410

## ARTICLE VI REGISTERED AGENT

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

ALLEEN LASCALA  
2700 CYPRESS ISLAND DR.  
PALM BEACH GARDENS, FL 33410

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALLEEN LASCALA  
2700 CYPRESS ISLAND DR.  
PALM BEACH GARDENS, FL 33410

\*\*\*\*\*  
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

Alleen Lascala  
Signature/Registered Agent

2/2/2002  
Date

Alleen Lascala  
Signature/Incorporator

2/2/2002  
Date

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02 FEB -8 AM 9:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA