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

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: LOn Zell

789-6735 789-0834 -

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



# FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 21, 2002

LONZELL L. GRAY 1624 FENTRESS AVE. DELTONA, FL 32783-5232

SUBJECT: LONZ'S INTERNATIONAL INC.

Ref. Number: W02000024372

We have received your document for LONZ'S INTERNATIONAL INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham Document Specialist New Filing Section

Letter Number: 402A00049274

## ARTICLES OF INCORPORATION

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

## ARTICLE I

The name of the corporation shall be:

INC. LONZ' S INTERNATIONAL,

#### PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is:

1624 FENTRESS AVEUNE, DELTONA FLORIDA,

### PURPOSE ARTICLE III

The purpose for which the corporation is organized is:

RETAIL / WHOLESALE SALE

#### SHARES ARTICLE IV

The number of shares of stock is:

## ARTICLE V INITIAL OFFICERS (DIRECTORS (optional)

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

LONZELL LEE GRAY, 490 WEST OHIO AVEUNE 32744 / Owner

## REGISTERED AGENT

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

OHIO AVE. LAKE HELEN LONZELL LEE GRAY, 490 WEST

## ARTICLE VII

The name and address of the Incorporator is:

LAKE HELEN FLORIDA 32744 LONZELL LEE GRAY 490 WEST OHIO AVEUNE

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

7-30-2002

2002

Signature/Incorporator