

P03000072372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

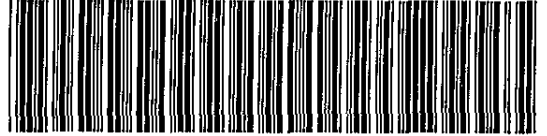
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

03 JUL -1 AM 10: 52

RECEIVED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 JUL -1 AM 10: 20

FILED

F. GROSSER

JUL 1 2003

TRANSMITTAL LETTER

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

SUBJECT: H. LIRA Construction, 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:

HENRY LIRA  
Name (Printed or typed)

P.O. Box 1475  
Address

Port Salerno, FL 34992  
City, State & Zip

772-871-5677  
Daytime Telephone number

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

**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:

H. LIRA CONSTRUCTION, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

P.O. Box 1475  
PORT SALERNO, FL 34992

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY & ALL LAWFUL BUSINESS  
IN STATE OF FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

HENRY LIRA PRES, & TREASURER  
JOYCE C. LIRA V. PRES + SEC.

**ARTICLE VI REGISTERED AGENT**

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


HENRY LIRA  
1- REFORMA LANE  
PORT ST. LUCIE, FL 34956

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

H. LIRA CONSTRUCTION, INC.  
1- REFORMA LANE  
PORT ST. LUCIE, FL 34956

\*\*\*\*\*  
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

7-1-03  
Date

  
Signature/Incorporator

7-1-03  
Date

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA