

P04000061727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

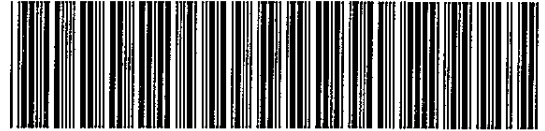
(Business Entity Name)

(Document Number)

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

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44-13

**TRANSMITTAL LETTER**

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

SUBJECT: L+B Stucco Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> \$70.00<br>Filing Fee | <input checked="" type="checkbox"/> \$78.75<br>Filing Fee<br>& Certificate of Status | <input type="checkbox"/> \$78.75<br>Filing Fee<br>& Certified Copy | <input type="checkbox"/> \$87.50<br>Filing Fee,<br>Certified Copy<br>& Certificate of<br>Status |
|--|--|--|---|
- ADDITIONAL COPY REQUIRED**

FROM: Randy Laforest  
Name (Printed or typed)

6831 Cherbourg Ave. N.  
Address

Tar Fl. 32205  
City, State & Zip

(904) 708-2583  
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:

L+B STUCCO INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

6831 Cherbourg Ave N.  
Jax. Fl. 32205

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Decorative Stone

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Randy Laforgue  
6831 Cherbourg Ave N.  
Jax. Fl. 32205  
(Director)

**ARTICLE VI REGISTERED AGENT**

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

Randy Laforgue  
6831 Cherbourg Ave N.  
Jax. Fl. 32205

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

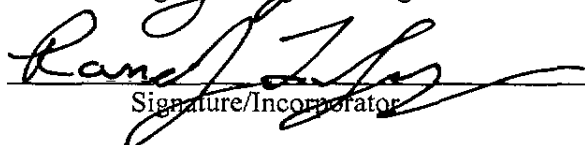
RANDY LAFORQUE  
6831 Cherbourg Ave N.  
Jax. Fl. 32205



\*\*\*\*\*  
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

4-5-04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

4-5-04  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA