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TRANSMITTAL LETTER

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

SUBJECT: Le Pa	age Cabnetry Incorporated			
Jebs Lett	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the artic	les of incornoration and	a check for:	
	l and one (1) copy of the three	tos or incorporation and	u chock for.	Í
\$70.00	□ \$78.75	\$78.75	\$87.50	ĺ
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FROM: Ti	mothy LePage			
	Name (Printed or typed)		
	609 Lagoon Oaks Cir.			
		ddress		
				\$ 5 5
	Panama City Beach Florida	32408		04 APR
	City,	State & Zip		⊼ਹ ?
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	850-249-0609			72
	Daytime Te	elephone number		<i>\infty</i>
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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:

Le Page Cabnetry Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

609 Lagoon Oaks Cir.

Panama City Beach Fl. 32408

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

To install custom wood work, and cabnetrys.

ARTICLE IV SHARES

The number of shares of stock is:

One thousand

INITIAL OFFICERS AND/OR DIRECTORS ARTICLE V

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

ARTICLE VI REGISTERED AGENT

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

Timothy LePage 609 Lagoon Oaks Cir. Panama City Beach Fl. 32408

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Signature/Registered Agent

Timothy LePage 609 Lagoon Oaks Cir. Panama City Beach Fl. 32408

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/Incorporator