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(Rei	questor's Name)	
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(City	y/State/Zip/Phone	#)
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SECRETARY OF STATE
ALL AHASSEE, FLORID

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TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for
\$70.00 Filing Fee	S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: HolliE Lowensten Name (Printed or typed) 7640 NW Joth Drue Address			
-	954-894-		3024

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

ARTICLE I NAME The name of the corporation shall be: Low Holle Inc	
The principal place of business/mailing address is: 76 40 NW Joth Dave pembrolle pires Flor 33024	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
For profit S'corporation	
ARTICLE IV SHARES The number of shares of stock is: /00	Z. C
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Ifollie Lowenstein President 7640 NW 20 Pembrolk pires Fla 33024	14 MAY -7 PH 1:46 ECRETARY OF STATE LLAHASSEE, FLORID
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	A
The name and Florida street address of the registered agent is: Hollie Lowers ten 7640 NW Doth Or Pembrolk pins Flor 33024	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Hollit lowerstein 7640 NW Josh Or pendalle pires	
**************************************	•
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	
Simply (Basistand A gent	<u> </u>
Signature/Registered Agent Date 4/16/10	/
Signature/Incorporator Date	<u> </u>

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)