

P04000081434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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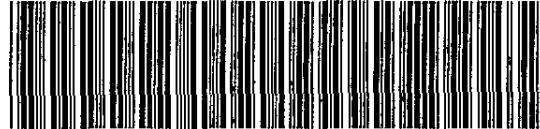
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 MAY 20 PM 1:26

TRANSMITTAL LETTER

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

SUBJECT: LMV Holdings Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: L. Vozza

Name (Printed or typed)

35246 US Hwy 19 North, Ste.#259

Address

Palm Harbor FL 34684

City, State & Zip

727-365-8026

Daytime Telephone number

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAY 20 PM 1:26

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:

LMV Holdings Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

35246 U.S.Hwy 19 north, Ste#259, Palm Harbor, FL 34684

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation is organized for the purpose of transacting any and all lawful business, including acting as Trustee. This corporation shall exist perpetually, commencing on the date of signing.

ARTICLE IV SHARES

The number of shares of stock is:

TTThis corporation is authorized to issue 7,500 shares of no par value common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

This corporation shall have one (1) director initially. The number of directors may be increased or decreased from time to time by the by-laws, but shall never be less than one (1). The name and address of the initial director of this corporation is L. Vozza, 35246 US Hwy 19 North, Ste#259, Palm Harbor FL 34684.

ARTICLE VI REGISTERED AGENT

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

L. Vozza, 35246 US Hwy 19 North, Ste#259, Palm Harbor FL 34684

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

L. Vozza, 35246 U.S.Hwy 19 North, Ste#259, Palm Harbor FL 34684

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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

L Vozza

Date

Signature/Incorporator

L Vozza

Date