

P04000094566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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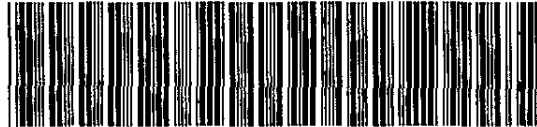
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*  
6/21/04

## TRANSMITTAL LETTER

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

SUBJECT: LL Sharp Eyes, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: MARJORIE LAFOREST

Name (Printed or typed)

20853 NW 4TH STREET

Address

PEMBROKE PINES, FLORIDA 33029

City, State & Zip

954-430-1563 OR 786- 419- 6610

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:

LL Sharp Eyes, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

20853 NW 4TH STREET, PEMBROKE PINES FLORIDA 33029

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SECURITY SERVICES

### ARTICLE IV SHARES

The number of shares of stock is:

MARJORIE LAFOREST

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARJORIE LAFOREST, 20853 NW 4TH STREET, PEMBROKE PINES FL 33029, PRESIDENT.

AUGUSTIN LORFILS, 265 NE 151ST, BISCAYNE GARDENS FL 33162, VICE PRESIDENT.

### ARTICLE VI REGISTERED AGENT

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

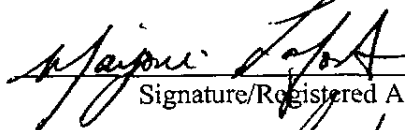
MARJORIE LAFOREST, 20853 NW 4TH STREET, PEMBROKE PINES FL 33029

### ARTICLE VII INCORPORATOR

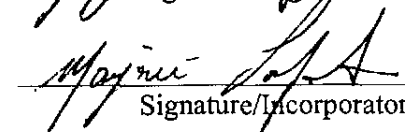
The name and address of the Incorporator is:

MARJORIE LAFOREST, 20853 NW 4TH STREET, PEMBROKE PINES FL 33029

\*\*\*\*\*  
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

6.17.4  
\_\_\_\_\_  
Date

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

6.17.4  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA