

PO4 000100645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

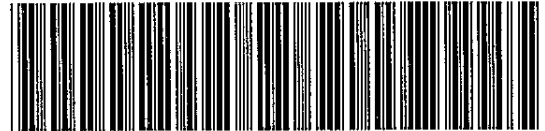
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400038303754

07/06/04--01033--010 **78.75

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

04 JUL -6 AM 11:20

RECEIVED

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL -6 PM 1:05

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. LLOMBART CORP.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

ARTICLES OF INCORPORATION
OF
LLOMBART CORP.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

LLOMBART CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

23150 S.W. 177 Avenue
Miami, Florida 33170

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000.00 shares of One (\$1.00) Dollar par value each.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JUAN E. FIGUERAS, ESQUIRE
7050 S.W. 86 Avenue
Miami, Florida 33143

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL -6 PM 1:05

ARTICLE V INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) Director initially. The number of Directors may be increased or diminished from time to time in accordance with the By-laws but shall never be less than one (1). The name and address of the initial Director of this corporation is:

OSMEL LLOMBART
23150 S.W. 177 Avenue
Miami, Florida 33170

ARTICLE VI INITIAL OFFICERS

The names and street addresses of the initial officer(s) of this corporation are:

OSMEL LLOMBART
23150 S.W. 177 Avenue --- President and Treasurer
Miami, Florida 33170

JOHN LLOMBART
23150 S.W. 177 Avenue --- Vice-President and Secretary
Miami, Florida 33170

ARTICLE VII INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

OSMEL LLOMBART
23150 S.W. 177 Avenue
Miami, Florida 33170

The undersigned has executed these Articles of Incorporation this
14th day of June, 2004.


OSMEL LLOMBART, Incorporator

CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

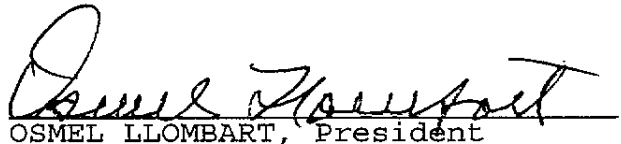
1. The name of the corporation is:

LLOMBART CORP.

2. The name and address of the registered agent and office is:

JUAN E. FIGUERAS
7050 S.W. 86 Avenue
Miami, Florida 33143

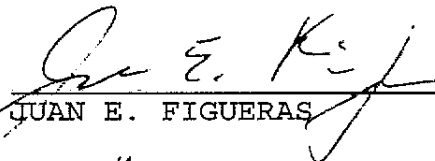
Signature


OSMEL LLOMBART, President

Date: June 14th, 2004.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature


JUAN E. FIGUERAS

Date: June 14th, 2004.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUL -6 PM 1:05