

P040001050600

(Requestor's Name)

FROM: (PLEASE PRINT)

PHONE

954 559-8537

Shona Henriques  
9860 Sheridan Street  
Pembroke Pines, FL  
33024

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

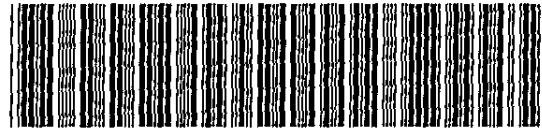
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GALLATINSEE FLORIDA

gr 7/15/04

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be: **LEGAL GOFERS SERVICES, INC.**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:  
**852 NW 134 AVE  
PEMBROKES PINES, FLORIDA 33028**

### ARTICLE III SHARES

The total number of shares of stock that this corporation is authorized to have outstanding at any one time  
Are 200 shares of Common Stock, no par value?

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:  
**SHONA HENRIQUES  
852 NW 134<sup>TH</sup> AVE  
PEMBROKE PINES, FLORIDA, 33028**

2004 JUL 15 PM 2:40  
ALLAHASSEE FLORIDA

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

SHONA HENRIQUES  
852 NW 134<sup>TH</sup> AVE  
PEMBROKE PINES, FL 33028

**PRESIDENT**

SHONA HENRIQUES  
852 NW 134<sup>TH</sup> AVE  
PEMBROKE PINES, FL 33028

**VICE-PRESIDENT**

SHONA HENRIQUES  
852 NW 134<sup>TH</sup> AVE  
PEMBROKE PINES, FL 33028

**SECRETARY**

SHONA HENRIQUES  
852 NW 134<sup>TH</sup> AVE  
PEMBROKE PINES, FL 33028

**TREASURER**

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

\_04th \_\_\_\_\_ day of \_\_\_\_\_ June \_\_\_\_\_, 2004 \_\_\_\_\_.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the Designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607051, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE 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: **LEGAL GOFERS SERVICES, INC.**

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

**SHONA HENRIQUES**  
(NAME)

**852 NW 134<sup>TH</sup> AVE**  
(ADDRESS)

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

**PEMBROKE PINES, FL 33028**  
(CITY/STATE/ZIP)

*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)

06/12/04  
(DATE)

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TALLAHASSEE FLORIDA