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TRANSMITTAL LETTER

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

SUBJECT:		erch, Inc.	
-	(PROPOSED CORPORA)	ENAME-MUST INCLUDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and a check for:	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 □ \$87.50 Filing Fee Filing Fee, & Certified Copy Certified Cop & Certificate Status ADDITIONAL COPY REQUIRES	of
FROM:	Lynne Gray Name (335 S. SRL		
	New Smryna,	FL 32168 State & Zip	
	386-428	1936	

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

The name of the corporation shall be: LNS Research, Inc
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: New Smryna, FC 32168
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Pre-employment background checks
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Lynne Gray-President 3: 27
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Lynne Gray 335 S. SR415 New Smyrna, FL 3216
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 335 S. SR415 New Smyrra, FL 32168

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Signature/Registered Agent Date
Signature/Incorporator Date

. . - . - . .

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