

PO4880109723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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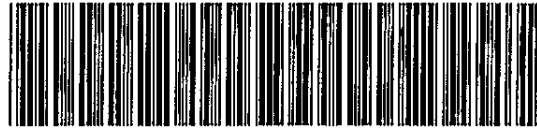
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7-26-04  
100

## TRANSMITTAL LETTER

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

SUBJECT: LEW Onsite SERVICES, 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: William Gonzalez  
Name (Printed or typed)

17645 87 lane, North  
Address

Lanai, FL 33470  
City, State & Zip

(561) 792-0785  
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)

**FILED**

**ARTICLE I NAME**

The name of the corporation shall be:

*L & W ONSITE SERVICES*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*17645-87 lane, North.  
LOXAHATCHEE, FL 33470*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*HEAVY MACHINERY REPAIRS*

**ARTICLE IV SHARES**

The number of shares of stock is:

*100*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

*William Gonzalez - 17645-87 lane, North. } President  
LOXAHATCHEE, FL 33470 }  
Lorenzo M. Calas Jr. 16356 CALDER DR. E } V. President  
LOXAHATCHEE, FL 33470 }*

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*William Gonzalez  
17645 87 lane, North.  
LOXAHATCHEE, FL 33470.*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*W. Gonzalez  
17645-87 lane, No  
LOXAHATCHEE, FL 33470*

\*\*\*\*\*  
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

*W. Gonzalez*

Signature/Registered Agent

*7-22-04*

Date

*X W. Gonzalez*

Signature/Incorporator

*7-22-04*

Date