

P04000 125 367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

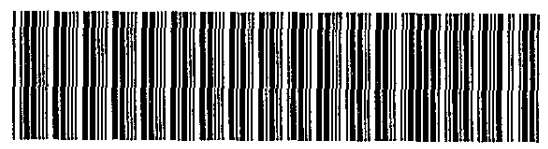
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/26/04--01015--007 **78.75

FILED
04 AUG 31 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

32437

TH 8/31/04

TRANSMITTAL LETTER

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

SUBJECT: LC & PJ SERVICES, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Larry Scott Corrie
Name (Printed or typed)

6757 SE AMYRIS COURT
Address

STUART FL 34997
City, State & Zip

772-
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 26, 2004

LARRY SCOTT CORRIE
6757 SE AMYRIS CT
STUART, FL 34997

SUBJECT: L.C. HANDYMAN SERVICES INC
Ref. Number: W04000032432

RECEIVED
04 AUG 31 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FL 32314

We have received your document for L.C. HANDYMAN SERVICES INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

In Article VI what is the title of Larry Scott Corrie? Principal officer is not a title.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Document Specialist
New Filings Section

Letter Number: 804A00052200

ARTICLES OF INCORPORATION

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:
L.C.& P.J. SERVICES INC.

ARTICLES II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:
6757 SE AMYRIS COURT.
STUART, FL 34997

ARTICLE III SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:
FIVE HUNDRED (500) SHARES OF COMMON STOCK WITH A PAR VALUE OF ONE DOLLAR (\$1.00) PER SHARE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS:

THE NAME AND FLORIDA STREET ADDRESS OF THE INITIAL REGISTERED AGENT IS:
LARRY SCOTT CORRIE
6757 SE AMYRIS COURT
STUART, FL 34997

ARTICLE V

NAME OF INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION ARE:
LARRY SCOTT CORRIE
6757 SE AMYRIS COURT
STUART, FL 34997


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 31 PM 2:33

FILED

SIGNATURE / INCORPORATOR

DATE

 8-31-09

ARTICLE VI

NAME AND ADDRESS OF PRINCIPAL OFFICER AND PRISIDENT OF THE CORPORATION

LARRY SCOTT CORRIE
6757 SE AMYRIS COURT
STUART, FL 34997


SIGNATURE / PRINCIPAL OFFICER AND PRESIDENT

8-31-04
DATE

ARTICLE VII

NAME AND ADDRESS OF VICE PRESIDENT OF THE CORPORATION

PAULA JEAN HALLUM
6757 SE AMYRIS COURT
STUART, FL 34997


SIGNATURE OF VICE PRESIDENT

8-31-04
DATE

LARRY SCOTT CORRIE

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 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 / REGISTERED AGENT

8-31-04
DATE