

P04 000132013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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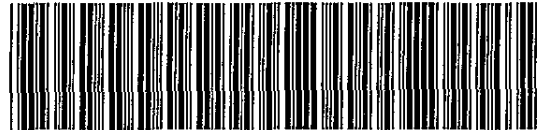
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

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

SUBJECT: L. G. MILAN CONSULTING 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: LOUIS G. MILAN
Name (Printed or typed)

9357 BLIND PASS RD., UNIT 201
Address

ST. PETE BEACH, FL 33706
City, State & Zip

727-368-9177
Daytime Telephone number

04 SEP 20 PM 1:12

SECRET
DIVISION OF STATE

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

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ST. PETERS BEACH, FL 33706
City, State & Zip

727-368-9177
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)

ARTICLE I NAME

The name of the corporation shall be:

L. G. MILAN CONSULTING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9357 BLIND PASS RD. UNIT 201
ST. PETE BEACH, FL 33706

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MARKETING & CONSULTING SERVICES FOR OTHER BUSINESSES.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

LOUIS G. MILAN PRESIDENT
SHARON M. MILAN VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LOUIS G. MILAN
9357 BLIND PASS RD. UNIT 201
ST. PETE BEACH, FL 33706

ARTICLE VII INCORPORATOR

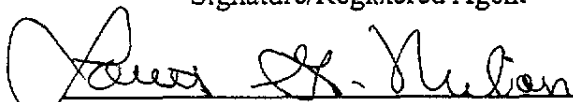
The name and address of the Incorporator is:

LOUIS G. MILAN
9357 BLIND PASS RD., UNIT 201
ST. PETE BEACH, FL 33706

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


Signature/Registered Agent

9/17/04
Date


Signature/Incorporator

9/17/04
Date

04 SEP 20 PM 1:12
SECRETARY OF STATE
DIVISION OF CORPORATIONS