P04000140495

(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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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 OCT -7 PM 3:56

DB 10/11

TRANSMITTAL LETTER

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

SUBJECT: Leumas Construction Corp.
(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: Alvester Samuel
Name (Printed or typed)

502-Blackstone Ave
Address

Deltona, Fl. 32725
City, State & Zip

386-956-8129 or 386-860-4456
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)

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ARTICLE I NAME

The name of the corporation shall be:

Leumas Construction Corp

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

502-Blackstone Ave
Deltona, Fl. 32725

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Transact business in Construction

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Alvester Samuel
sole proprietor (owner only)

ARTICLE VI REGISTERED AGENT

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

Alvester Samuel 502-Blackstone Ave.
Deltona, Fl. 32725

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Alvester Samuel 502-Blackstone Ave.
Deltona, Fl. 32725

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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

Alvester Samuel — 10/6/04
Signature/Registered Agent — Date
Alvester Samuel

Alvester Samuel — 10/6/04
Signature/Incorporator — Date
Alvester Samuel