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(Requestor's Name)			
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PICK-UP WAIT MAIL			
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Certified Copies Certificates of Status			
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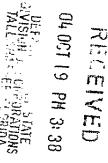
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TRANSMITTAL LETTER

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

SUBJECT:	N.S. Emp	ine Inc.	ASSESSED TO	
	(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 of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
Drayne Bayer Joseph Cohen Name (Printed or typed) 1915 Domar Or Address				
	Tallahassee	FL 32304 State & Zip	<u></u>	
	(850) 766 - Daytime To	6)35 elephone number	<u> </u>	

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	, , , , , , , , , , , , , , , , , , ,
L.N.S. Empire. Inc.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	<u>.</u> ,
1915 Doomar Or. Tallahassee ,FL 3230	r
ARTICLE III PURPOSE The purpose for which the corporation is organized is: HOUSE CRANING	_ , . , <u>,</u>
Comme reial cleaming ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	P1
Owayre F. Oalton 1915. Downar Or. Talla)	nassee, PL 32308
Joesph Cohen	λ
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
1	×
Joseph Cohen 1915 Doumer Dr 19	llahassee Fl Jerup
ARTICLE VII INCORPORATOR	and the second s
The <u>name and address</u> of the Incorporator is:	Tallahara Fl 303.
Dwayne, F. Baken 1915 Doman Dr.	Tallahassee, FL 323,
Joseph Cohen	//
**************************************	ration at the place designated in this
Signature/Registered Agent I	111-13-2004
Digitaluic/registerou Agent	Date
Els 172 Cheeple Cake	10-13-2004
Signature/Incorporator	Date