

PD50000 5280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

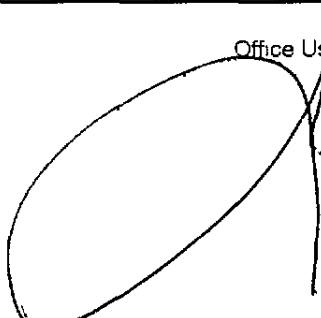
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

 1/11/05



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01/10/05--01046--004 **76.75

RECEIVED
JAN 10 P 1:49
TALAMON, J. L.
2005 JAN 10 1:12:33
JAN 10 1:12:33
JAN 10 1:12:33

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. LA CASA DEL BABALAWO, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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:

La Casa del Babalawo, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4120 Enterprise Ave., Suite 100
Naples, FL 34104

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Starting a new business, wholesale/retail gift shop

ARTICLE IV SHARES

The number of shares of stock is:

100 Shares @ \$5.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Pres/Sec/Director
Justo J Ramos
740 19th Street SW
Naples, FL 34117

ARTICLE VI REGISTERED AGENT

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

Justo J Ramos
740 19th Street SW
Naples, FL 34117

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Justo J Ramos
740 19th Street SW
Naples, FL 34117

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

1-07-05
Date



Signature/Incorporator

1-07-05
Date

FILED
2005 JAN 10 P 1:49
SECRETARY OF STATE
TALLAHASSEE, FL 32310