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8/31/05

TRANSMITTAL LETTER

Department of State 1

Division of Corporations

P. O. Box 6327

Tallahassee, FL 32314

SUBJECT: LAN APPLIANCE REPAIR, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	mal and one (1) copy of the ar	icles of incorporation and	d 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 DPY REQUIRED

FROM-	OMAR CARDENAS		
* ********	Name (Printed or typed)		
	9919 W. OKEECHOBEE RD. APT. 537		
	Address		
	HIALEAH GARDENS, FL 33016		
	City, State & Zip		
	786-663-9569		
	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	FILED
The name of the corporation shall be:	05 AUG 29 AM 8: 40
LAN APPLIANCE REPAIR, INC.	SECRETARY OF STATE TALLAHASSEF, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 9919 W. OKEECHOBEE RD. APT. 537 HIALEAH CARDENS, FL 33016	
The purpose for which the corporation is organized is: TO ENGAGE OR BUSINESS PERMITTED UNDER THE LAWS STATES AND FLORIDA.	IN ANY ACTIVITIES OF THE UNITED
ARTICLE IV SHARES The number of shares of stock is: 5,000 SHARES, ALL O ONE DOLLAR (\$1.00) PAR VALUE	OF ONE CLASS
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): OMAR CARDENAS - PRESIDENT- VICE 9919 W. OKEECHOBEE RD. APT. 537 HALEAH GARDENS, FL 33016	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the regist OMAR CARDEN AS 9919 W. OKEECHOBEE RD. APT. 537 HALEAH GARDENS, FL 33016 ARTICLE VII INCORPORATOR	tered agent is:
The name and address of the Incorporator is:	
OMAR CARDENAS 9919 W. OKEECHOBEE RD. APT. 537 HIALEAH GARDENS, FL 33016	******************************
Having been named as registered agent to accept service of process for the above stated corp	poration 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 $\frac{g/24/05}{Date}$ $8/24/05$
Signature/Registered Agent OMAR CARDENAS	Date
Signature/Incorporator OMAR CARDENAS	Date