P05000150530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

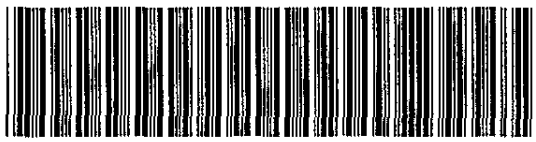
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900061266289

11/03/05--01003--001 **78.75

FILED
05 NOV -9 AM 8:11
TALLAHASSEE, FLORIDA

# COVER LETTER

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

**SUBJECT:** Luxury Property Investors, Inc.
**(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)**

And copy of fictitious name licence!
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: Lisa L. Lukovics
Name (Printed or typed)

919 Spring Park Loop
Address

Celebration, Fl. 34747
City, State & Zip

407-256-0288
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: Luxury Property Investors, Inc.

***ARTICLE II PRINCIPAL OFFICE***

The principal place of business/mailing address is: 919 Spring Park Loop
Celebration, Fl. 34747

***ARTICLE III PURPOSE***

The purpose for which the corporation is organized is: Property Management

FILED
05 NOV -9 AM 10:01
TALLAHASSEE, FLORIDA

***ARTICLE IV SHARES***

The number of shares of stock is: 100

***ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS***

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

Lisa L. Lukovics 919 Spring Park Loop, Celebration, Fl. 34747
"President"

Michael L. Flynn 919 Spring Park Loop, Celebration, Fl. 34747
"Vice President"

***ARTICLE VI REGISTERED AGENT***

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

Lisa L. Lukovics 919 Spring Park Loop, Celebration, Fl. 34747

***ARTICLE VII INCORPORATOR***

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

Lisa L. Lukovics 919 Spring Park Loop
Celebration, Fl. 34747

**********

***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***

Lisa L. Lukovics — 11/7/05
Signature/Registered Agent — Date

Lisa L. Lukovics — 11/7/05
Signature/Incorporator — Date