

PD 6000019754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

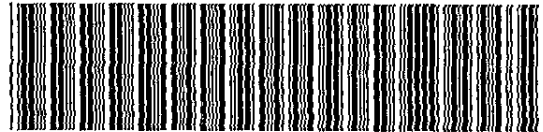
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 FEB -7 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1000 FEB 10-2006

COVER LETTER

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

SUBJECT: **LASTER ENTERPRISES, INC.**
(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: **FERNANDO IGLESIAS**
Name (Printed or typed)

 780 DELTONA BLVD., #108
Address

 DELTONA, FLORIDA 32725
City, State & Zip

 386.860.1140
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:

LASTER ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2457 BARBAROSSA AVENUE
DELTONA, FLORIDA 32738

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CABINET SALES, SERVICE AND INSTALLATION

ARTICLE IV SHARES

The number of shares of stock is:

ONE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CLYDE B. LASTER, PRESIDENT
2457 BARBAROSSA AVENUE
DELTONA, FLORIDA 32738

ARTICLE VI REGISTERED AGENT

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


CLYDE B. LASTER
2457 BARBAROSSA AVENUE
DELTONA, FLORIDA 32738

ARTICLE VII INCORPORATOR

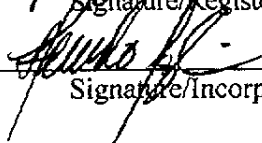
The name and address of the Incorporator is:

FERNANDO IGLESIAS
780 DELTONA BLVD., SUITE 108
DELTONA, FLORIDA 32725


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



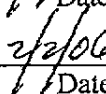
Signature/Registered Agent



Signature/Incorporator



Date



Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA