

# Florida Department of State

Division of Corporations Public Access System

## Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000080372 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 : (305)634-3694 Fax Number : (305)633-9696

# FLORIDA PROFIT/NON PROFIT CORPORATION

lirde services, inc.

A MARKET AND THE PROPERTY OF T	
Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu Corporate Filing Menu

Help

EMP I RE

3/27/2006 11:09 AM WHR-27-2006 11:40



HUUUUUUUUU 100 100

### 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:

LIRDE SERVICES, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6466 Sw 130 Place

# 911

Miami, Fi 33183

#### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Any business permitted in the State of Florida.

#### ARTICLE IV SHARES

The number of shares of stock is:

500

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

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

Maria Francisco, President

6466 SW 130 Place

# 911

Miamí, Fl 33183 Lirde Nunez, Vice-President 6466 SW 130 Place

# 911

Miami, F1 33163

#### ARTICLE VI REGISTERED AGENT

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

Lirde Nunez

6466 SW 130 Place

# 911

Miami, Fl 33183

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Maria Francisco

6466 SW 130 Place

# 911

Miami,

33183 

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 fumiliar I th and accept the appointment as registered agent and agree to act in this capacity

Registered Agent

Menature/Incorporator

Z0.9

EMP I RE

0b:II 900Z-LZ-NAM