

P060000051041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

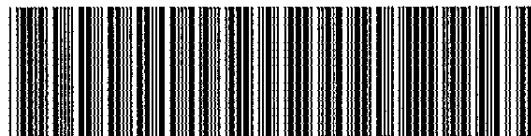
(Business Entity Name)

(Document Number)

Certified Copies: \_\_\_\_\_ Certificates of Status: \_\_\_\_\_

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FILED  
2006 APR 10 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

g 4/11/06

COVER LETTER

FILED

2006 APR 10 AM 8:38

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

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SUBJECT: L.A.M.N., 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: Jennifer Fournier  
Name (Printed or typed)

409 Pickfair Terrace  
Address

Lake Mary FL 32746  
City, State & Zip

407-924-8722  
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:

L.A.M.N., INC.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

409 Pickfair Terrace  
Lake Mary FL 32746

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact any and all lawful business

## 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):

Jennifer Fournier President  
409 Pickfair Terr.  
Lake Mary FL 32746

## ARTICLE VI REGISTERED AGENT

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

Jennifer Fournier  
409 Pickfair Terr.  
Lake Mary FL 32746

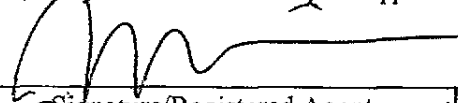
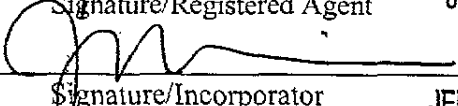
## ARTICLE VII INCORPORATOR



The name and address of the Incorporator is:

Jennifer Fournier  
409 Pickfair Terr.  
Lake Mary FL 32746

\*\*\*\*\*

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 JENNIFER FOURNIER  
  
\_\_\_\_\_  
Signature/Incorporator JENNIFER FOURNIER

 4/5/06  
\_\_\_\_\_  
Date  
 4/5/06  
\_\_\_\_\_  
Date