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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

**SUBJECT: Labeed & Peter 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: Muzaffar Choudhry**

Name (Printed or typed)

**5249 NW Milner Dr.**

Address

**Port St. Lucie, FL 34983**

City, State & Zip

**772-873-8691**

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:

Labeed & Peter Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

5249 NW Milner Dr. Port St. Lucie, FL 34983

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Installation of Hurricane shutters.

**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):

President :Muzaffar Choudhry 5249 Nw Milner Dr. Port St. Lucie, FL 34983

V.president:Peter zambuto 330 Nw Granadeer St. Port St.Lucie,FL 34983

**ARTICLE VI REGISTERED AGENT**

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

Muzaffar Choudhry 5249 Nw Milner Dr. Port St. Lucie FL 34983.

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

PETER, ZAMBUTO, 330, NW Granadeer st: Port st:Lucie  
FL 34983.

\*\*\*\*\*

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

*[Handwritten Signature]*

Signature/Registered Agent

*[Handwritten Signature]*

Signature/Incorporator

4-10-06.

Date

4-10-06

Date

FILED  
06 APR 13 PM 3:01  
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