

PO6000109579

(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



000077885240

07/24/06--01020--029 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 21 PM 2:38

006-3486-111

COVER LETTER

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

SUBJECT: LMC Design, 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: Luis M. Castellon

Name (Printed or typed)

1640 SW 17 Street

Address

Miami, FL 33145

City, State & Zip

786-302-2949

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2006

LUIS M. CASTELLON
1640 SW 17 STREET
MIAMI, FL 33145

SUBJECT: LMC DESIGN, INC.
Ref. Number: W06000034865

We have received your document for LMC DESIGN, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Document Specialist
New Filing Section

Letter Number: 306A00049262

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:

LMC Design, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 21 PM 2:39

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1640 SW 17 Street, Miami, FL 33145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide architectural design and development consulting.

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Luis M. Castellon, President

ARTICLE VI REGISTERED AGENT

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

Luis M. Castellon, 1640 SW 17 Street, Miami, FL 33145

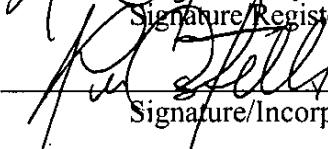
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Luis M. Castellon, 1640 SW 17 Street, Miami, FL 33145

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

07/21/2006

Date

07/21/2006

Date