PO7000022472

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

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

SUFFIX)			
eck for:			
\$87.50			
Filing Fee,			
Certified Copy			
& Certificate of			
Status			
REQUIRED			
FROM: Alexis N. Glanz Name (Printed or typed)			
1500 Bay Rd. 828			

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

In compliance with Chapter 607 and/or Chapter 621, F.S.	(Profit)
ARTICLE I NAME	-
The name of the corporation shall be: LX5 Inc.	FILED
	07 FEB 19 PM 1: 47
	SEGRETARY OF STATE
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is: \500 \\i\i\i\i\i\i\i\i\i\i\i\i\i\i\i\i\i\i	10 Reach FL 33139
Mar	MI Sever 112 2712 1
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	. 9
The purpose for which the corporation is organized is.	ales
ARTICLE IV SHARES	
The number of shares of stock is:	
100	
ARTICLE V INITIAL OFFICERS AND/OR DI	PECTADO
List name(s), address(es) and specific title(s): Hexis Glanz, 1500 Bay Rd #SBZ8	Miami Beau FL 301001, 11031000
	T VICE P
Ramona Glanz 201, Morningside	Dr. Sarasota H. 39236, Treasurer
9	344
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acce	eptable) of the registered agent is:
Hexis Glanz	
1500 Bay Rd #828	
Miumi Beach, FL 33139	
The name and address of the Incorporator is:	N Glanz
1500 B	501 Pd # 879
The name and address of the Incorporator is: Alexis 1500 P	Reach FL 33139
15/10014/1	Jeans, Jan
***********	**********
Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered	
	i agree to act at and capacity
	2/7/07
Signature/Registered Agent	Date
(May 7	2/7/07
Signature/Incorporator	' Date
Alexis Gtanz	

·ARTICLES OF INCORPORATION