

PO700036596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

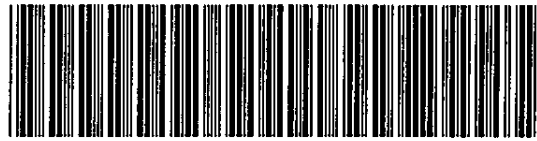
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000093726570

03/21/07--01016--013 \*\*87.50

FILED

07 MAR 21 AM 8:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3/23/07

## COVER LETTER

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

SUBJECT: LOUECYHER ON THE ROAD, 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: DAVID ELOWITZ  
Name (Printed or typed)

19723 TRICKEL PT DR.  
Address

BOCA RATON, FL 33498  
City, State & Zip

561-482-7009  
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: **LOUECYMER ON THE ROAD, INC**

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**19723 BRICKEL PT DR  
BOCA RATON FL 33498**

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**SELLING WOMENS CLOTHING**

## ARTICLE IV SHARES

The number of shares of stock is:

**1,000**

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**DAVID ELOWITZ PRESIDENT / PRES  
CESLIE ELOWITZ VICE PRESIDENT / SECTY**

## ARTICLE VI REGISTERED AGENT

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

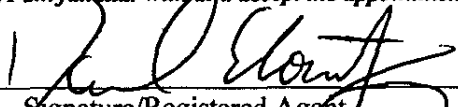
**DAVID ELOWITZ  
19723 BRICKEL PT DR  
BOCA RATON FL 33498**

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**DAVID ELOWITZ  
19723 BRICKEL PT DR  
BOCA RATON FL 33498**

\*\*\*\*\*  
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

**3/16/07**  
Date

**3/16/07**  
Date

**FILED**  
07 MAR 21 AM 8:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA