

PD7000046245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

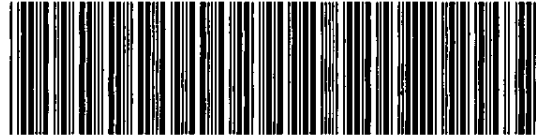
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/13/07--01010--002 **78.75

FILED
07 APR 13 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE APR 16 2007

COVER LETTER

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

SUBJECT: L. A. Q. E. PRODUCTIONS, 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: LAM MINH NGUYEN

Name (Printed or typed)

7901 BAYMEADOWS CIRCLE EAST APT. 305

Address

JACKSONVILLE, FLORIDA 32256

City, State & Zip

904 894 5993

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)

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07 APR 13 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

L. A. Q. E. PRODUCTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7901 BAYMEADOWS CIRCLE EAST # 305, JACKSONVILLE, FL 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LEGITIMATE BUSINESS AND EFFECTIVE DATE IS FIVE (5) BUSINESS DAYS FROM DATE OF FILING.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LAM MINH NGUYEN, PRESIDENT/SECRETARY/TREASURER, 7901 BAYMEADOWS CIRCLE EAST # 305, JACKSONVILLE, FL 32256.

ARTICLE VI REGISTERED AGENT

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

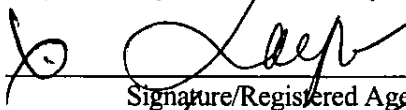
LAM MINH NGUYEN, 7901 BAYMEADOWS CIRCLE EAST # 305, JACKSONVILLE, FL 32256.

ARTICLE VII INCORPORATOR

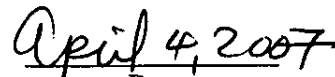
The name and address of the Incorporator is:

LAM MINH NGUYEN, 7901 BAYMEADOWS CIRCLE EAST # 305, JACKSONVILLE, FL 32256.

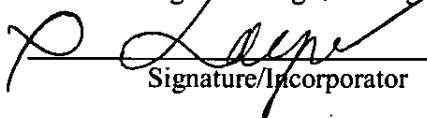
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



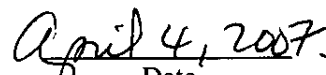
Signature/Registered Agent



Date



Signature/Incorporator



Date