# PD700096875

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



200108577852

08/29/07--01016--006 \*\*78.75

07 AUG 29 PM 4-49

# **COVER LETTER**

FILED

O7 AUG 29 PM 4: 49

SECRETARY OF STATE

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

SUBJECT: LEA	SE 2 SELL-LEASE TO	OWN, Inc	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
	•	•	•
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	<ul><li>  √ \$78.75 Filing Fee</li><li>&amp; Certificate of Status</li></ul>	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
·		ADDITIONAL CO	OPY REQUIRED
EROM. F	ROCHELLY RIVERA	•	
1 KOW	Name	(Printed or typed)	4
	7901 KINGSPOINTE PK	WY STE 20 Address	
	ORLANDO FL 32819	, State & Zip	·
			_
	407-694-2397		-
,	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:

LEASE 2 SELL LEASE 2 OWN, IAC

FILED

07 AUG 29 PM 4: 49

SECRETARY OF STAIR

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

7901 KINGSPOINTE PARKWAY SUITE 20 ORLANDO FL 32819

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

### ARTICLE IV SHARES

The number of shares of stock is:

2,000,000

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

TITLE:PRESIDENT
ROCHELLY RIVERA
1007/I IVERSON DR. ORLANDO FL 32832
TITLE: VP
WILLIER E TORRES
622 PRINCE CHARLES DR. DAVENPORT FL 33837
TITLE: VP
CIRO ALMEIDA
10074 IVERSON DR. ORLANDO FL 32832
TITLE VP
JULIANA SALAZAR
8443 DOVER VIEW LN. ORLANDO FL 32832

#### <u> ARTICLE VI REGISTERED AGENT</u>

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

ROCHELLY RIVERA 10074 IVERSON DR ORLANDO FL 32832

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROCHELLY RIVERA 10074 IVERSON DR ORLANDO FL 32832

Having been na	amed as registered age	ent to accept service of	process for the a	ibove stated corpora	ition at the place	designated in this
certificate,   am	familiar with and acc	ept the appointment as	registered agent	and agree to act in t	his capacity	

Kochelly Kujero	08/24/2007
Signature/Registered Agent	Date
Kothelly Lucra	08/24/2007
Signature/Incorporator	Date