

PD7000108686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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07 OCT - 1 PM 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

SUBJECT: Leslie Leon Haywood 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: Leslie Haywood  
Name (Printed or typed)

4100 S. HOSPITAL DR # 302  
Address

PLANTATION FL. 33317  
City, State & Zip

(954) 583-3500  
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)

**FILED**

07 OCT -1 PM 4:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Leslie Leon Haywood INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

4100 S. HOSPITAL DR. # 302  
PLANTATION FL. 33317

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO OPERATE A BUSINESS UNDER

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

Leslie Haywood  
8525 OLD COUNTRY MANOR # 511  
DAVIE FL. 33028  
PRESIDENT

**ARTICLE VI REGISTERED AGENT**

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

Leslie Haywood  
8525 OLD COUNTRY MANOR # 511  
DAVIE FLORIDA 33028

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

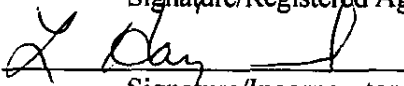
Leslie Haywood  
8525 OLD COUNTRY MANOR # 511  
DAVIE FL. 33028

\*\*\*\*\*

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

9/24/07  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

9/24/07  
\_\_\_\_\_  
Date