

PO7000114591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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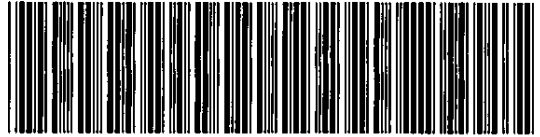
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CD.10-18

COVER LETTER

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

SUBJECT: Lifebidesign, 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: Donna LeVasseur
Name (Printed or typed)

17305 N.W. 7th St.
Address

Pembroke Pines, FL 33029
City, State & Zip

954 499-1971
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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ARTICLE I NAME

The name of the corporation shall be:

Life bidesign, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17305 N.W. 7th St
Pembroke Pines, Fl 33029

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A consulting Firm

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):

17305 N.W. 7th St
Pembroke Pines, Fl 33029

Donna LeVasseur, President-Owner
Louis LeVasseur, Vice President

15121 N.E. 6th Ave
NMB, Fl 33162

ARTICLE VI REGISTERED AGENT

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

Donna LeVasseur
17305 N.W. 7th St. Pembroke Pines, FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Donna LeVasseur
17305 N.W. 7th St. Pembroke Pines, FL 33029

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

Donna LeVasseur
Signature/Registered Agent

10/15/07
Date

Donna LeVasseur
Signature/Incorporator

10/15/07
Date

Donna LeVasseur

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TALLAHASSEE, FLORIDA