

P08000035312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

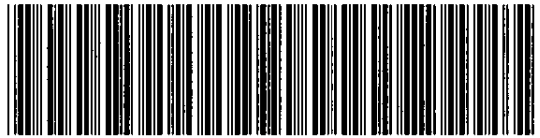
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers APR 07 2008

TRANSMITTAL LETTER

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

SUBJECT: L & R ELITE INSURANCE GROUP 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: PRO TAX SERVICES, INC
Name (Printed or typed)

937 LONGDALE AVE

Address

LONGWOOD, FL 32750

City, State & Zip

(407) 835 - 9845

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

L & R ELITE INSURANCE GROUP INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2700 WESTHALL LANE SUITE # 130
MAITLAND, FL 32751

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:

100 - ONE HUNDRED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LUIS MARTINEZ - PRESIDENT
491 WELLESLEY ST
OVIEDO, FL 32765

RAMUNAS PROCHORSKIS - VICE PRESIDENT
1731 BRIGHT MEADOWS CT
ORLANDO, FL 32818

ARTICLE VI REGISTERED AGENT

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

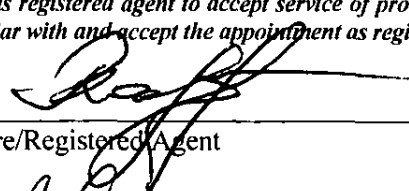
RAMUNAS PROCHORSKIS
1731 BRIGHT MEADOWS CT
ORLANDO, FL 32818

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LUIS MARTINEZ
491 WELLESLEY ST
OVIEDO, FL 32765

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

4/2/2008

Date



Signature/Incorporator

4/2/2008

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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