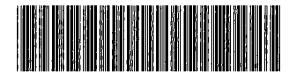
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(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				



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AP 10/20/08

W8000045813

COVER LETTER

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

SUBJECT: LLW Customer Service Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
	(PROPOSED CORPORA inal and one (1) copy of the artic				
\$70.00		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	Lucresia West Name (Printed or typed)				
1143 Shallcross Ave Address Colondo F1 32828					
City, State & Zip 239 - 823 - 9912 Davtime Telephone number					

NOTE: Please provide the original and one copy of the articles.

REF. #: W080000 45813



October 3, 2008

LUCRESIA WEST 1143 SHALLCROSS AVE. ORLANDO, FL 32828

SUBJECT: LLW CUSTOMER SERVICE, INC.

Ref. Number: W08000045813

We have received your document for LLW CUSTOMER SERVICE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2009 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

If you have any further questions concerning your document, please call (850) 245-6062.

Letter Number: 808A00052589

Eula Peterson Regulatory Specialist II New Filing Section

ivicion of Corporations P.O. BOY 6227 Tellaharras Florida 22214

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:

LLW Customer Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1143 shallcross Ave.

Orlando, FL. 32828

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any and all Lawful Business under the Laws of the State of Florida

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):

Lucresia West 1143 shallcross Ave. Orlando, FL. 32888

ARTICLE VI REGISTERED AGENT

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

Lucresia Vest 1143 shallcross Ave, Orlando, FL. 32828

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Lucresia West 1143 Shallcross Ave.

orlando, FL. 32828

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/Incorporator

10/14/08

10/14/08

10/14/08

10/14/08

Date

OB OCT 20 PH 4: 37
SECRETARY OF STATE
ANIASSEE, FLORIDA