

P09000058040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

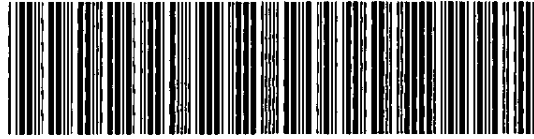
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/18/09--01018--003 \*\*70.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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1109000028795

**COVER LETTER**

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

**SUBJECT:** LCSCC, 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:** Larry Cinco  
Name (Printed or typed)  
3076 Rio Palma N  
Address  
Indialantic  
City, State & Zip  
321 501 3929  
Daytime Telephone number  
larry8869@gmail.com  
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 19, 2009

LARRY CINCO  
3076 RIO PALMA N  
INDIALANTIC, FL 32903

SUBJECT: LCSCC, INC.  
Ref. Number: W09000028795

We have received your document for LCSCC, 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):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Paisley A Alford  
Clerk  
New Filing Section

Letter Number: 409A00021016

**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: LCSCC, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

3076 RIO PALMA N  
INDIALANTIC, FL 32903

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To provide consulting services

**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): Larry Cinco, President  
Susan Cinco, Director

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Larry Cinco  
3076 Rio Palma N Indialantic, Florida 32903

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: Larry Cinco  
3076 Rio Palma N Indialantic, Florida 32903

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TALLAHASSEE, FLORIDA

\*\*\*\*\*  
*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*

*Larry Cinco*  
Signature/Registered Agent

6/15/09  
Date

*Larry Cinco*  
Signature/Incorporator

6/15/09  
Date