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2009 OCT 13 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 14 2009

COVER LETTER

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

SUBJECT: LAS CONSULTANTS, 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: MANUEL A. RODRIGUES
Name (Printed or typed)

142 MADISON DRIVE
Address

NAPLES, FLORIDA 34110
City, State & Zip

239-250-9229
Daytime Telephone number

Manuel50@comcast.net
E-mail address: (to be used for future annual report notification)

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:

LAS CONSULTANTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

13410 PARKER COMMONS BLVD., STE101

Fl. Myers Fl 33912

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LYNN A. SCHNEIDER, PRESIDENT

11875 ROSALINDA CT.

FORT MYERS, FLORIDA 33912

ARTICLE VI REGISTERED AGENT

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

MANUEL A. RODRIGUES

142 MADISON DRIVE

NAPLES, FLORIDA 34110

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MANUEL A. RODRIGUES

142 MADISON DRIVE

NAPLES, FLORIDA 34110

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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

Manuel A. Rodrigues

Signature/Registered Agent

Manuel A. Rodrigues

10-8-09

Date

Manuel A. Rodrigues

Signature/Incorporator

Manuel A. Rodrigues

10-8-09

Date