709000092178

(Requestor's Name)			
(Address)			
(133,555)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
, 			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
,			
Special Instructions to Filing Officer:			





700162519887

11/10/09--01026--006 **78.75

TO ACKNOWLEDGE OF FILING

VISIDII OF CORPORATIONS

09 NOV 10 AM 11:51

COVER LETTER

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

SUBJECT:	Lincicome W PROPOSED CORPORA	000 Fixture	S, INC.
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	
	Mary L Lincico		
	9231 Havana	Address	
_1;	lavana FL City,	32333 State & Zip	 .
_	850 - 364 - Daytime T	5/03	
manus a cons	LWFTC1 C Hotel	nail.com	
	E-man address: (10 be used	i tor tuture annual report r	iourication)

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:	E a
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	^C O
ARTICLE I NAME	111:0
The name of the corporation shall be:	् ७/ ७.
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Linci come Wood Fixtures, Twc.	ORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	
9231 Havana Hwy	
HOWOND FL 32333 ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ORGanized For the Purpose of transacting	
ARTICLE IV SHARES	
The number of shares of stock is:	
100 Shares common stock values	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
Mary Lincicome President & Tresure 9231 Havana Huy Havana FL 32333	
Toop Witherow Vice Hospent & Secretary 3233 Haughe Havane FL 32333	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:	
HB Stivers 245 E. Virginia Street	
Tal. FL. 32301	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Mary Lincicome 9231 Havana Hwy	
Hauana FL 32333	*****
Having been named as registered agent to accept service of process for the above stated corpo place designated in this certificate, I am familiar with and accept the appointment as registere agree to act in this capacity	
Mary Nuncione 11-10-09 Spinature/Registered Agent Date	
A	
Mary Vencicome 11-10-09	
Signature/Incorporator Date	