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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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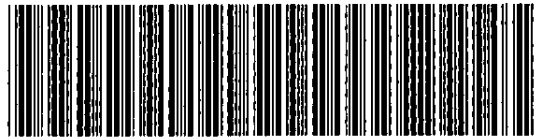
(Business Entity Name)

(Document Number)

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

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Per

11-13-09

## COVER LETTER

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

SUBJECT: LB ADJUSTERS, 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: BATHCHANGIAIS LAURENT  
Name (Printed or typed)

770 NW WEST 122ND STREET  
Address

MIAMI, FL 33168  
City, State & Zip

786-3153251  
Daytime Telephone number

(561) 541-2692

BATHCHYLA@AOL.COM  
E-mail address (to be used for future annual report notification)

**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: LB ADJUSTERS, INC  
770 NORTH WEST 122ND ST,  
MIAMI, FL 33168

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:  
770 North West 122<sup>nd</sup> S  
Miami, Fla. 33168

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
ANY LEGAL PURPOSE

**ARTICLE IV SHARES**

The number of shares of stock is:  
1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
BATCHANGIAIS LAURENT  
700 NW 122ND STREET  
MIAMI, FL 33168

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
BATCHANGIAIS LAURENT  
770 NW 122ND STREET  
MIAMI, FL 33168

\*\*\*\*\*

*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

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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