

P10000009229

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(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

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10 JAN 29 PM 3:50
SECRETARY OF STATE
MAIL ROOM

W10000003393

2-1-10 CH

COVER LETTER

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

SUBJECT: Laura's 1st Restaurant 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: Sorin Popa

Name (Printed or typed)

630 sw 4th Ave

Address

Hallandale

City, State & Zip

954-684-9491

Daytime Telephone number

popasoleil@aol.com

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 22, 2010

SORIN POPA
630 SW 4TH AVE.
HALLANDALE, FL 33009

SUBJECT: LAURA'S 1ST RESTAURANT INC.
Ref. Number: W10000003393

RECEIVED
10 JAN 29 AM 10:57
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for LAURA'S 1ST RESTAURANT INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

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) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 310A00001853

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:

Laura's 1st Restaurant Inc.

ARTICLE II PRINCIPAL OFFICE

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

~~12345~~ 630 SW 4th AVE Hallandale, FL, 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Restaurant

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SORIN POPA

630 SW 4th AVE Hallandale, FL, 33009

ARTICLE VI REGISTERED AGENT

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

SORIN POPA

630 SW 4th AVE Hallandale, FL, 33009

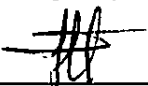
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

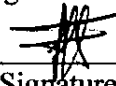
SORIN POPA

630 SW 4th AVE Hallandale, FL, 33009

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

Jan. 19. 2010

Date

Jan. 19. 2010

Date

FILED
10 JAN 29 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA