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





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2010 FEB 25 P 2: 40

SECRETARY OF STATE, ALL ASSESSED AND ASSESSED ASSESSED AND ASSESSED AND ASSESSED AND ASSESSED ASSESSED AND ASSESSED ASSE

FEB 25 2010 D. A. WHITE

COVER LETTER

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

SUBJECT:	LTS Enterprises Inc.			
	(PROPOSED CORPORA	ATE 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	□ \$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
	ADDITIONAL COPY REQUIRED			
FROM:	Clive Jackson Name (Printed or typed)			
	P.O. Box 347705 Address			
		FL 33234-7705		
	City	, State & Zip		
	(305	5) 442-8019		
	Daytime	Telephone number		
		001@hotmail.com	Ŋ	
·	E-mail address: (to be use	ed 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:

LTS Enterprises Inc.

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2010 FEB 25 P 2: 40

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

Address: 10841 NW 29th Street, Doral, FL 33071 Mailing Address: P.O. Box 347705, Miami, FL 33234

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail

ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares @ \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Clive Jackson - President & Secretary

Marcus Hamilton - Vice President

ARTICLE VI REGISTERED AGENT

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

Clive Jackson

10841 NW 29th Street, Doral, FL 33071

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Clive Jackson

10841 NW 29th Street, Dorak, FL 33071

Signature/Incorporator