

P10000033806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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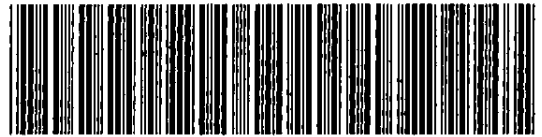
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 APR 19 PM 12:13

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COVER LETTER

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

SUBJECT: LANXS TRADE CORP

(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	<u>\$78.75</u>	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status

ADDITIONAL COPY REQUIRED

FROM: DANIEL CHULIA

Name (Printed or typed)

703 NW 111 CT APT 3

Address

MIAMI FL 33172

City, State & Zip

786-319-6034

Daytime Telephone number

danielchulia@yahoo.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:

LANXS TRADE CORP

ARTICLE II PRINCIPAL OFFICE

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

703 NW 111 CT SUITE 3

MIAMI FL 33172

ARTICLE III PURPOSE

IMPORT & EXPORT SALES MISCELLANEOUS

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):

DANIEL CHULIA PRESIDENT

703 NW 111 CT APT 3 MIAMI FL 33172

ARTICLE VI REGISTERED AGENT

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

DANIEL CHULIA

703 NW 111 CT APT 3 MIAMI FL 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DANIEL CHULIA

703 NW 111 CT APT 3 MIAMI FL 33172

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

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10 APR 19 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04/16/10

Date

04/16/10

Date